

2018-2019 GUM GARDENERS STUDY CLUB APPLICATION

www.gumgardeners.org

Co-Presidents:	Ashley Williams	Cell: (503) 803-6158	Email: gumgardeners@gmail.com
	Joanne Schenk	Cell: (503) 869-5030	Email: gumgardeners@gmail.com
Treasurer:	Marlene Schotte	Cell: (503) 734-5041	Email: marnscho@frontier.com

Dear Study Club Members,

We are looking forward to the 2018-2019 year, and are excited about our line-up of speakers! Attending all of the classes will provide you with 16 hours of CE credits. This includes the required 2 hours of CE in Medical Emergencies, CPR & BLS, and Infection Control. The schedule and any speaker notes can be viewed and printed from our website: www.gumgardeners.org

Please, fill out the membership application below, and return it with your **dues of \$60** payable to “**Gum Gardener's Study Club**”, and mail to Marlene Schotte before Sept 21, 2018. **If your office is paying your dues include YOUR NAME and CHECK MEMO payable to Gum Gardeners.**

Mail application and dues to: Marlene Schotte 10892 NW Supreme Ct. Portland, OR. 97229

To verify your CE hours for license renewal, contact Marlene Schotte.

For other questions please contact the co-presidents, Ashley Williams and Joanne Schenk, at gumgardeners@gmail.com

DATE: 4th Monday of the month (November & May will be the 3rd Monday due to holidays)
TIME: 6:30-8:30 PM
LOCATION: Providence St Vincent's Medical Center,
Souther Auditorium, 9155 SW Barnes Rd, Portland, OR

Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ E-mail _____

Days available to temp _____

Cities/areas available to temp _____

Gum Gardeners member since (year) _____

GG Leadership role(s) and year(s) held _____

Hygiene school and year of graduation _____