



BEGONIA SOCIETY OF WESTERN AUSTRALIA (INC.)

President

Kim Fletcher
10 William Street
Armadale WA 6112
Ph (08) 9399 2388

Secretary

Neil Connery
PO Box 1987
Mandurah WA 6210
Ph (08) 9582 7738

Treasurer

Maria van Hoof
150 Masters Road
Darling Downs WA 6122
Ph (08) 9526 2352

Email: begoniaswa@live.com.au web: www.begoniaswa.org

The Society was founded in 1981. Monthly meetings are held at the Harold King Community Centre, in Westfield. Visitors are welcome to attend our meetings, although should telephone first to check times and places.

The Society is a foundation member of the Association of Australian Begonia Societies (Inc) and all members receive a copy of 'Begonia Australis', the quarterly journal of the Association.

At our meetings there are competitions, and a plant sales table that is always popular since it enables members to buy begonias that are not available commercially. Talks on begonia culture and other topics of interest to growers are presented at each meeting. Newsletters are distributed at each meeting.

Garden visits are held to the homes of members several times a year. It is usual for visiting members to make a small donation to cover the cost of morning or afternoon tea.

Membership fees are \$24.00 for both single and family membership ('Family' here means two or more persons at the same address, they receive only one copy of the journal and newsletter). If you wish to have the newsletters posted to you there is an additional \$7.20 per annum to cover postage costs. There is a fee of \$2.00 at each meeting to cover hall hire, afternoon tea and a raffle ticket.

Meetings - 1.30 pm for a 2pm start on the second Saturday of each month
at the Harold King Community Centre, Grovelands Drive, Westfield.
(Near the junction of Grovelands Dr and Westfield Rd nearest the railway line.)
Ring the President or Secretary for details.

Tear off and forward to Treasurer

Application for Membership

Name(s) _____

Mr, Mrs, Ms etc. given names and family name, please

Address _____

Postcode _____

Telephone No. _____

Name(s) for badge(s) _____

Date _____

Total Enclosed _____

Receipt Issued.....
Entered on Members List.....
On Newsletter List.....
AABS Capitation Fee.....