

# Citrus Organization for the Gifted

## Membership Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Student(s)/Grade(s) \_\_\_\_\_

\_\_\_\_\_

School \_\_\_\_\_

Dues: \$20.00

Your membership is very important in keeping Gifted Education services strong and effective in Citrus County. Please complete this membership form and make your check payable to C.O.G. Completed applications and checks may be sent to:

Autumn Johnston CPA, PA  
852 U.S. Highway 41 South  
Inverness FL 34450