



Garden Club of Georgia Record of Garden Therapy Donation

A certificate of appreciation will be awarded to garden clubs that donate \$25 or more to Garden Therapy before March 1st. These monies support the garden therapy activities at State Regional Hospitals.

Name of Garden Club _____ Club # _____

Name of Club President _____

Address _____

City, Zip _____ Phone _____

Name of Club Treasurer _____

Address _____

City, Zip _____ Phone _____

Make check payable to "CGC-GARDEN THERAPY" and mail to:

Margaret Ballard
GCG Garden Therapy Treasurer
P. O. Box 338
Cornelia, Ga 30531-0338

Please complete the top section and return with your check. Keep the bottom section for your Club's records.

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Check # _____ Amount \$ _____ Date sent _____

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