



REQUEST FOR SUSTAINER STATUSWashington County Master Gardeners

NAME (print)	Date of WCMG Graduation			
ADDRESS				
Street		City	State	Zip
PHONE (H)	(C)	E	-Mail:	
I understand that as a Ma	ster Gardener wi	ith Sustainer Sta	tus: Please initial each	line
I have been a membe	r in good standing	g (dues paid, hour	s completed) for a minir	num of seven (7) years
I shall submit a Requ recommendation to the Exec			air if the WCMG Memb	ership Committee for
I shall pay annual W	CMG dues.			
I shall be accorded al hours. (I am encouraged to			requirements on work hese hours.)	ours or education
I shall not hold office	e or vote.			
I may serve on a com	mittee or projects			
My time spent will no (10 or 15 year pins of	•		rvice.	
I may attend any ever	nt or activity depe	ending upon space		
I may revert back to a become an active member a following calendar year.	•		G Membership Chair of Education requirements i	•
Signature	Date			
>>>>>>>>	>>>>>Office	e Use Onlv >>>>	>>>>>>	·>>>>>>>
Date received by Extension Reason(s) for Denial	Office/	/		
Signature		Signature _		
Washington Co. E	Extension Agent	Date MAIL TO:	WCMG Press	ident Date

Washington County Extension Office ATTN: WCMG Membership Chair 2536 N. McConnell, Fayetteville, AR 72704 (Or call 479-444-1755 for information)

CRITERIA FOR SUSTAINER STATUS

(WCMG Bylaws - Article IV - Membership Classifications)

The **Request for Sustainer Status** form shall be submitted to the Chair of the Membership Committee for a recommendation to the WCMG Executive Committee before the end of the fiscal year.

The Sustainer:

- 1. Shall be an active member in good standing for a minimum of seven (7) years.
- 2. Shall pay WCMG dues.
- 3. Shall have no requirements of work hours or education hours.
- 4. Shall not hold office or vote.
- 5. May be active on a committee or a project, if desired.
- 6. Shall not accrue years of WCMG service.

To return to active membership, a completed Request for Return to Program form shall be submitted for approval to the WCMG Executive Committee within seven(7) years of leaving the program and will fulfill work and education requirements in the following calendar year.

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OTHER DONATIONS OF CASH OR NON-CASH

Washington County Master Gardeners Date Submitted by Donor

Date Submitted by Donor/	
Date Recorded at WCMG/	
WCMGs and the general public may donate gifts of cash or non-cash items to memorialize or hono	r an individual
the WCMG organization as a whole, a specific project, committee and/or event. Each type of donate	on or gift of an
value shall be reported to the Washington County Extension Office. Only one honoree may be design	znated per gift.
Please note: This form cannot be used for donations to the WCMG Endowment Fund. For endown	ent fund
donations, use the WCMG form titled "Endowment Fund."	
Name of MG Project/Committee/Event	
Name of Person to Honor or Remember	
Donor's Name	
Home Address	
City, State, Zip Code	_
Phone (H) (C) E-Mail:	
Written Acknowledgment of Gift goes to:	_
Name of person, project, committee, event	
Home Address	_
City, State, Zip Code	
Identify any special request. If an in-kind gift, please include an estimated value	_
These funds will be administered by the Washington County Master Gardeners and the Washington	n County
Extension Agent providing support to the Washington County Master Gardener Program.	•
	Donor
Signature Date	_
Mail this form to: Washington County Master Gardener	

2536 N. McConnell Avenue Fayetteville, AR 72704-5521 **Please make a copy for your files.** *Revised 2021 WCMG Forms - Page 24*