



# Southern Tier Orchid Society

## Board of Directors

### President

Anne Tinker  
607-797-1383  
atinker at cortlandhospital dot org

### Vice President

Dee Janis  
607-217-5889  
deejanis at yahoo dot com

### Treasurer

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pete\_oconnell at pall dot com

### Secretary

LuAnn Myers  
570-278-9733  
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### AOS Representative

Dave Clemens  
570-879-4244  
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### Members-at-large

Patricia Bonamo - 12/09  
607-748-5314  
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Bob Rudin - 12/10  
607-748-6036  
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Sandra Marsh - 12/11  
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### Newsletter & Membership

Dee Janis  
607-217-5889  
deejanis at yahoo dot com

### Show Chairs

Anne Tinker  
Dee Janis  
Lin Richards

### Web Page

<http://www.storchidsociety.com/>

October 2009

## NEXT MEETINGS

October 18, 2009 ~ 2:00 Vestal Library  
November 15, 2009 ~ 2:00 Vestal Library

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- Orchid Mystery
- 2010 Membership Drive
- Epidendrum Surplus

## Epidendrum Orchid

A friend of orchids sent me some unlabeled, unpotted epidendrum orchids - though they are labeled as to color. If you are interested in any of these, please contact me (Dee Janis) - any left over plants will be raffled off at the October meeting!

Thanks, Brad, this is much appreciated!

## EDITOR'S NOTE

Contributions, including pictures, to the STOS newsletter from members are encouraged. Contributions must be submitted by the 25<sup>th</sup> day of each month to the editor.

If you have difficulties with the electronic format of this newsletter, please contact the editor at [southerntierorchidsociety at gmail dot com](mailto:southerntierorchidsociety@gmail.com)





# SOUTHERN TIER ORCHID SOCIETY 2010 MEMBERSHIP APPLICATION

Southern Tier Orchid Society (STOS) annual memberships are \$15 per individual or household, and we ask you to complete the following form to update our membership and mailing lists for the newsletter. Payments are accepted in cash at the meeting or by check or money order, made payable to **Southern Tier Orchid Society**. Please send this form and your payment to:

Pete O'Connell, STOS Treasurer  
3718 West Road  
Cortland, NY 13045

or

Dee Janis, STOS Membership Chair  
2 Spurr Avenue  
Binghamton, NY 13903

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NAME: \_\_\_\_\_

PLEASE CHECK ONE:

\_\_\_\_\_ I AM A NEW MEMBER (PLEASE COMPLETE FORM BELOW).

\_\_\_\_\_ I AM RENEWING MY MEMBERSHIP AND MY CONTACT INFORMATION IS THE SAME AS LAST YEAR'S.

\_\_\_\_\_ I AM RENEWING MY MEMBERSHIP AND AM UPDATING MY CONTACT INFORMATION BELOW.

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

Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Do you mind if we release your contact information? \_\_\_\_\_  
(yes or no)

**I would like to receive the newsletter (please check one):**

By mail \_\_\_\_\_

By e-mail \_\_\_\_\_

**Please note:** This form can also be found on our website ([www.storchidsociety.com](http://www.storchidsociety.com))

Received: \_\_\_\_\_  
Date

By: \_\_\_\_\_