American Rose Society
Consulting Rosarian Emeritus Request Form

Consulting Rosarian Emeritus Nominee: ____________________________________________

District: _______________________________________________________________________

Approved By:

District Director: ___________________________________________________________________

District Chairman of Consulting Rosarians: ____________________________________________

National Chairman of Consulting Rosarians: ____________________________________________

Status Verified by ARS Headquarters: ______________________________________________

Please Include Your Check / Money Order or Credit Card Information.

All Orders MUST be Paid in Advance.

□ Visa □ Mastercard □ Discover □ American Express

Credit Card Number: ________________________________________________________________ Expiration Date: ______________________

Cardholder’s Name: ________________________________________________________________

_____ CR Emeritus Certificate - $10.00 each

Total Certificate $___

_____ CR Emeritus Pin - $10.00 each

Total Emeritus Pin $___

SALES TOTAL $___

Shipping and Handling Charges U.S. (Please call for international rates)

Sales Total

$10.00 - $14.99 - $3.50

$15.00 - $19.99 - $6.00

$20.00 - $39.99 - $6.50

$40.00 - $79.99 - $13.50

$80.00 - $124.99 - $15.50

$125.00 and up - $25.50

Total Shipping

TOTAL ENCLOSED $___

Ship to:

Name: ____________________________________________________________________________

Address: __________________________________________________________________________

City, State, Zip; __________________________________________________________________