



# Application for Membership

Type of Membership:

Active \$150.00     Associate \$15.00     Allied \$125.00

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

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

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

\_\_\_\_\_

E-Mail: \_\_\_\_\_

Website: \_\_\_\_\_

Office: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ Other: \_\_\_\_\_

Primary Field of expertise:

Grower       Installation       Irrigation

Maintenance     Sales       Service

Other: \_\_\_\_\_

Description of services:

\_\_\_\_\_

\_\_\_\_\_

Certifications: (ex. Pesticide)

\_\_\_\_\_

\_\_\_\_\_

Other industry related organization memberships: (ex. GGIA):

\_\_\_\_\_

\_\_\_\_\_