

South Carolina Seedsmen's Association
MEMBERSHIP APPLICATION

Please complete this application and return it the SC Seedsmen's Association along with a check for \$55 to cover the annual dues. Checks should be made payable to the SC Seedsmen's Association.

CONTACT PERSON: _____

TITLE: _____

BUSINESS NAME: _____

STREET OR PO BOX: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

OFFICE PHONE: _____ **OFFICE FAX:** _____

MOBILE PHONE: _____ **HOME PHONE:** _____

E-MAIL: _____

Briefly describe your company's function in the seed industry (i.e., wholesaler, lawn & garden, etc.)

Does your company maintain an office in South Carolina? _____

Have you ever been a member of the SC Seedsmen's Association? _____ **When?** _____

SIGNATURE: _____ **DATE:** _____

Sponsor: (Optional) _____

Mail to: PO Box 11173
Columbia, SC 29211

Contact: 803 240-6927