

South Carolina Fertilizer and Agrichemicals Association
P. O. Box 1316, Pendleton, SC 29670 • 864-261-6311 or 650-5306
 Email: scfaa@bellsouth.net Web Page: www.scfaa.org

Membership Application

Name:

Company:

Address:

Telephone (Bus):

Telephone (Cell):

Email:

2011 Sustaining (Corporate) Membership Dues \$400	
2011 Contributing (Retail) Membership Dues \$150	
2011 Active Membership Dues \$60	
2011 Associate Membership \$30	
Amount Enclosed	

Sustaining (Corporate) Membership \$400.00

A Sustaining Membership includes up to two active memberships and a full page ad in our Membership Directory. Additional active memberships are \$50 each. The Membership Directory will be distributed to SCFAA members and farmers. Those eligible for a Sustaining Membership include: (1) wholesalers of pesticides, fertilizers and seed; (2) equipment, pesticide and fertilizer manufacturers/distributors; (3) other affiliated agribusiness entities or individuals interested in promoting the purposes of SCFAA.

Contributing (Retail) Membership \$150.00

A Contributing membership includes up to three active memberships. Additional active memberships are \$50 each. Those eligible for a Contributing Membership include: suppliers/retailers of pesticides, fertilizer and seed, and other affiliated agribusiness entities or individuals interested in promoting the purposes of SCFAA.

Active Membership \$60.00

An Active Membership includes one individual membership. Those eligible to become an Active Member include: individuals engaged in agribusiness, farmers and individuals interested in promoting the purposes of SCFAA.

Associate Membership \$30.00

An Associate Membership includes one individual membership. Those eligible to become an Associate Member include: industry retirees and professional agricultural workers who are employed by a city, county, state or federal government agency, a non-profit organization or an educational entity.

Method of Payment: **Check** **Visa** **Mastercard** **American Express**

Security code on back of card (last three numbers): _____ **Expiration Date:** _____

Card Number ____ - ____ - ____ - ____

Billing address is different from above. _____.