



# COMMERCIAL GROWERS OF WISCONSIN

P.O. Box 320066 Franklin, WI 53132 [cgwi.org](http://cgwi.org)

## Member Renewal/ New Member Application

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Website \_\_\_\_\_

Contact Person \_\_\_\_\_ Owner \_\_\_ Manager \_\_\_ Grower \_\_\_ Other \_\_\_\_\_

Contact Person Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Contact Email Address \_\_\_\_\_

What type of business are you? *(Check all that apply)*

Greenhouse Grower  Fruit & Vegetable Grower  Hemp Grower  Retail Garden Center

Landscape  Contractor  Wholesale Horticultural Supplier  Floral/Cut Flower

Do you have a social media presence? *(Check all that apply)*  Facebook  Twitter  Instagram

How did you learn about us? \_\_\_\_\_

May we email newsletters, meeting notices, and renewal notices to you to reduce costs? Yes \_\_\_ No \_\_\_

Are you willing to host a meeting? Yes \_\_\_ No \_\_\_

**Please select Membership Package:**

<input type="checkbox"/> Platinum	Two Year Membership	\$249.00
<input type="checkbox"/> Gold	One Year Membership	\$139.00
<input type="checkbox"/> Silver	<b>First-time</b> CGW Member (1 year)	\$99.00
<input type="checkbox"/> Bronze	Associate Membership*	\$59.00

**\*The Associate Membership is open only to (please check one):**

- Retired Individuals
- Out of State Businesses
- Special request. Please state reason (*subject to board approval*)

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\*Associate members may be charged higher registration fees for some CGW events

**Make checks payable to:**  
*Commercial Growers of Wisconsin*

**Mail completed forms to:**  
*Commercial Growers of Wisconsin*  
*P.O. Box 320066*  
*Franklin, WI 53132*

*Membership Applications & Dues Payments can be completed online at [cgwi.org](http://cgwi.org)*



**BOARD OF DIRECTORS**

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