



COMMERCIAL GROWERS OF WISCONSIN

W3626 Decora Road Horicon, WI 53032 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	First-time 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*)

*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



BOARD OF DIRECTORS

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