

West Virginia Nursery & Landscape Association, Inc.

The undersigned hereby applies for membership in the West Virginia Nursery & Landscape Association, Inc., for which _____ in the amount of \$ _____ is enclosed.
(cash/check)

✿ Active membership in the Association shall be open to all residents of West Virginia who grow and/or sell ornamental nursery stock as registered nurseries or nursery dealers, including trees, evergreens, shrubbery and perennials and have actively engaged in retail or wholesale business of these products for a minimum of two years, as a majority portion of their livelihood, and who shall bear a reputation for trustworthy dealings, which must be maintained as a condition of membership. Dues shall be \$35.00 per year.

✿ Affiliate membership shall be spouse and/or employees of active members. Dues shall be \$5.00 per year.

✿ Associate members shall be those individuals, partnerships or corporations who furnish materials or render services to the nursery and landscape business or who are associated with the nursery and landscape business in any way. Associate membership shall be extended to and shall include landscape architects, commercial horticulturists, Christmas tree growers, related industries, superintendents of parks and estates, technical officials of the Department of Agriculture and the state's educational institutions. Out-of-state nurserymen may also be accepted as associate members. Such associates shall not hold elective office nor be eligible for membership on the Board of Directors, and shall have no voting rights. Associate member dues shall be \$25.00 per year.

✿ Allied membership: Membership for national and regional and/or local merchandisers. To qualify for consideration, these firms must have at least 25% of their gross sales in green goods and maintain year round sales facilities for nursery stock. Representatives of these firms shall have no voting privileges, cannot hold elective offices or appointed positions within the Association. Each store will be counted as one allied member. Dues shall be \$100.00 per store, per year.

Firm Name _____ Date _____
Owner's Name _____ Phone _____ Fax _____
Street or RFD# _____ County _____ E-mail _____
City _____ State _____ Zip Code _____
Mailing Address (if different from above) _____

Business Category: Please circle all that apply
Arborist Landscape Construction Nursery Supplies Sod Farm Educator
Landscape Maintenance Perennial Nursery Wholesale Nursery Retail Nursery
Landscape Architect Landscape Nursery Other _____
Date Business Established _____ (Please describe)

Name of Person Representing Firm _____
Bank Reference _____
Trade References (3) _____
State License Number _____ Inspection Number _____ Date _____

Signed _____ Signed _____
(applicant) (Sponsored by Active Member of WVNLA Association)

Approved: Yes No Association President _____
Date _____