

GEORGIA WATERMELON ASSOCIATION, INC.

P.O. Box 1109 LaGrange, GA 30241 706-845-8575 - Main 706-883-8215 - Fax

GWA Membership Application

Support Your Industry and Join Today

	New Member	□Renewal Member
NAME:		_ COMPANY:
ADDRESS:		_CITY/STATE:
TELEPHONE :		_ZIP:
OTHER:		FAX:
WEB SITE:	EMAIL:	
REFERRED BY: —		
WAT	TERMELONS GROWN	ACREAGE – (ESTIMATED AVERAGE)
	This information is for internal nurnoses (only; your information is respected and kept confidentially
If <u>Allied</u> , what is the	\$100 Allied (per e nature of your business (products, etc)?	rsons who are in the Seed, Chemical, Containers, etc. industry)
	TOTAL DUE: \$_	
Make ch	eck payable to and mail to:	Credit Card payment is also accepted:
	GWA P.O. Box 1109 LaGrange, GA 30241 706-845-8575 706-883-8215 (fax) dcheplick@asginfo.net	TYPE OF CARD: MC Visa Disc Amex CARD NUMBER: EXPIRATION DATE: SECURITY CODE: (3 digit number on back of card) NAME ON CARD: SIGNATURE: