

**Saginaw Valley Nursery & Landscape Association**  
**MEMBERSHIP APPLICATION AND RENEWAL FORM**  
**Please Complete & Remit with Membership Renewal**

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact \_\_\_\_\_  
(This name is to whom all mailings will be sent! One per company)

Telephone \_\_\_\_\_  
Fax \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-Mail \_\_\_\_\_  
Website \_\_\_\_\_

Service Offered \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Areas Served \_\_\_\_\_  
\_\_\_\_\_

Key Employees \_\_\_\_\_  
# Of Years in Industry \_\_\_\_\_  
College degree received \_\_\_\_\_  
\_\_\_\_\_

MNLA                    \_\_\_\_\_ Yes                    \_\_\_\_\_ No

CGIP on Staff        \_\_\_\_\_ Yes                    \_\_\_\_\_ No

Names \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Membership        \_\_\_\_\_ Regular \$100.00  
\_\_\_\_\_ Associate \$100.00

**Make Checks Payable To MNLA**