

## 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 of	nly; your information is respected and kept confidentially
If <u><b>Allied</b>,</u> what is th	\$50 Associate \$100 Allied (personant personant	ons 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: