



ORGANIC FERTILIZER ASSOCIATION OF CALIFORNIA

MEMBERSHIP APPLICATION

The following firm/individual makes an application for membership in the Organic Fertilizer Association of California and agrees to abide by its Bylaws. Membership dues are enclosed in the amount of \$ _____ for one year. Renewal notices will be emailed annually.

Firm Name _____

Contact Person _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Membership Categories (check category that applies):

_____ Active Voting Member – Any person (individual or entity) that is a producer, manufacturer, distributor, or retailer of organic fertilizer (as defined by the USDA Organic Program). Dues are \$1,000 per year.

_____ Associate Non-Voting Member – Any person (individual or entity) interested in the purposes of the association and does not qualify for active membership. Dues are \$500 per year.

_____ Individuals - \$75

_____ Government/Education – free.

By signing this form you consent to electronic transmission of relevant materials from OFAC. This includes emails and billing. Please inform us if you do not wish to receive electronic communications.

Signature of Representative _____ Date _____

Printed Name of Representative _____

Please mail the completed form to PO Box 4628, Orland, CA 95963 or email to organicfertilizerassociation@gmail.com.