2020 SGGA MEMBERSHIP FORM

PLEASE COMPLETE THE FORM BELOW AND SUBMIT IT, ALONG WITH PAYMENT, TO THE SGGA OFFICE

2020 MEMBERSHIP YEAR Company Name: _____

Applicant Name: _____

Mailing Address: _____ City/Town: _____

Prov: _____ Postal Code: _____

Business Telephone #: _____ Alt Phone #: _____

Fax Number: _____ E-mail: _____

May the SGGA use your Business Name for promotional purposes? _____Yes _____ No

I give SGGA permission to share my contact info with other growers and suppliers. _____
SIGNATURE

Active Membership Information (check all that apply)

Greenhouse Vegetable

☐ Cucumbers ☐ Tomatoes ☐ Peppers ☐ Other(s):_____

☐ Bedding Plants ☐ Potted Plants ☐ Perennials ☐ Cut Flowers ☐ Poinsetttias ☐ Garden Center
☐ Wholesale ☐ Retail
☐ Other(s): _____

Please select your size* of operation to help the SGGA identify programs and benefits that fit our member's needs:

☐ Small – under 9,999 ☐ Moderate – 10,000 – 24,999 ☐ Medium – 25,000 – 1 acre ☐ Large – over 1 acre

** Size is determined by the square footage you have that is covered by a structure and you have the capacity to control the heating & / or cooling environment.*

I would like to receive my Greenhouse Canada subscription

☐ electronically ☐ printed copy in the m ail

***IMPORTANT:** Would you prefer to receive communications by: ☐ Mail ☐ E-mail

The SGGA newsletter will be shared with you via the preference indicated.

Membership Type

☐ Active Member / Grower – Basic Membership $125.00 $_____

☐ Add $0.01 per square foot over 10,000 to a maximum of $325.00

# of square feet _____ x $0.01 = $_____

☐ Associate Member / Trade Membership $175.00 $_____
includes listing in suppliers list on website

☐ Educator / Government Membership $125.00 $_____

☐ Student Membership $ 25.00 $_____

Subtotal = $_____

GST 5% = $_____

Total Enclosed = $_____

FAX OR MAIL THIS FORM TO:
Saskatchewan Greenhouse Growers Association
BOX 68, MIDDLE LAKE, SK S0K 2X0 FAX: 306-367-2403
Telephone: 306-367-2012 Email: saskgga@gmail.com

Payment Method

*Please submit payment payable to the
Saskatchewan Greenhouse Growers Association

Amount Submitted /
Authorized: $_____

☐ Cheque - Cheque Number: _____

☐ Credit Card (Visa / Mastercard)

Cardholder's Name: _____

_____

Credit Card Number:

_____/_____/_____/_____

Expiry Date: _____/_____

Cardholder's Signature:

_____