



Membership Application

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Harrisburg, Pennsylvania 17110

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customerservice@christmastrees.org - www.christmastrees.org

I hereby make application for membership in the Pennsylvania Christmas Tree Growers Association, and certify that I am engaged in, or directly involved with, growing and / or selling Christmas trees or related products.

Business Name _____ Date _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ E-mail _____

Website _____ County _____

I would like to receive *The Bulletin* in electronic format, sent via email. In addition to the above email address, please send it to the following email addresses:

Recipient #1: _____ Recipient #2: _____

How did you become interested in PCTGA membership? (If one of our members told you about our association, please let us know so that we may thank them!) _____

Active (Grower) Members - \$195 Number of Acres Planted _____

Main Operation (circle one): 1. Wholesale 2. Choose & Cut 3. Retail 4. Other _____

Annual Membership Dues – New members who join on or after July 1 of any year will pay \$95 for the remainder of the calendar year and will not be allowed to participate in the Buyer/Seller Hotline; new members remitting \$195 on or after October 1 will enjoy membership until the end of the following calendar year. New members are those that have not been a member of PCTGA in the past 3 or more years. Approximately \$15 of this amount is used in lobbying efforts and is not tax deductible.

Bulletin Subscription - \$40

You can receive all four issues of *The Bulletin*, our print newsletter for just \$40. You will not be considered a member of PCTGA, and would have to pay non-member rates to attend any of our conferences, but have access to all of the printed information that we distribute.

Christmas Tree Magazine Subscription - \$22

This is a separate publication from the PCTGA Newsletter, the *Bulletin*. If you would like to receive a copy of *Christmas Tree Magazine*, at a discounted rate from an individual subscription, please add \$22 subscription fee.

**Please make check payable to PCTGA and mail to the above address
OR pay by Visa, MasterCard or Discover and fax to (717) 238-9985.**

Total to charge to card \$ _____

Card Number: _____ Exp. Date: _____ 3-Digit Code: _____

Card Holder Name: _____ Signature: _____