

Specialty Seed Growers of Western Oregon (SSGWO)

Membership Application

Growers agree to an assessment of 0.25% of gross returns (\$25/\$10,000) to be paid to the SSGWO. Assessments will be held back by the companies with whom the growers have contracts and will be sent to SSGWO at the time the growers receive their settlements. Contracting companies may contact the SSGWO Administrator to verify the membership status of growers.

Grower Name: _____

Doing business as: _____

Mailing Address: _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Cell Phone: _____ **Office/Other Phone:** _____

Email Address: _____

Signature: _____ **Date:** _____

By signing this application, I hereby grant authority to all companies with whom I have contracts to deduct assessments henceforth, until such time as I withdraw my membership by notifying the SSGWO Administrator.

List Contracting Companies: _____

Submit application to:

Angie Smith
Association Administrator
PO Box 1871
Wilsonville OR 97070

Phone: 503-685-7578
Email: smith@pacwestcom.com

SUGGESTIONS FOR RESEARCH PROJECTS OR OTHER ISSUES TO CONSIDER:
