

WILLAMETTE VALLEY SPECIALTY SEED ASSOCIATION

MEMBER PROFILE FORM

MEMBER COMPANY INFORMATION:

Company Name: _____ **Contact Name:** _____

Mailing Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Email Address: _____ **Phone Number:** _____

Member Type: Active (AC) Affiliate (AF) Associate (AS) Homestead (HS)
(circle one) Honorary (HN) Not Active (NA)

REPRESENTATIVE PINNING INFORMATION: (does not apply to Associate or Honorary members)

List all map pinning representatives below. A pinning account will be set up with user name and password, and will be sent directly to the pinning representative by email. Please allow 5-7 business days for processing.

| NAME | CELL PHONE | EMAIL |
|---|--|---|
| <input type="checkbox"/> Add New Representative | <input type="checkbox"/> Remove Representative | <input type="checkbox"/> Edit Representative: (update password or contact info) |
| <input type="checkbox"/> Add New Representative | <input type="checkbox"/> Remove Representative | <input type="checkbox"/> Edit Representative: (update password or contact info) |
| <input type="checkbox"/> Add New Representative | <input type="checkbox"/> Remove Representative | <input type="checkbox"/> Edit Representative: (update password or contact info) |
| <input type="checkbox"/> Add New Representative | <input type="checkbox"/> Remove Representative | <input type="checkbox"/> Edit Representative: (update password or contact info) |

Return form to:

Mail: WVSSA, PO Box 2223, Wilsonville, OR 97070
Email: office@thewvssa.org

For questions, please contact:

Angie Smith, Executive Director
Office: 503-685-7578

Email: angie@pacwestresources.com