

NEW MEMBER APPLICATION

BUSINESS NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OWNER NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CELL PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WEBSITE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MEMBERSHIP CATEGORY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(See third Page for Categories)

I CHOOSE TO \_\_\_\_have my information displayed in the melna.org directory

  \_\_\_\_(if Active Member) be included on the map on plantsomethingmaine.org

 \_\_\_\_receive the Plant Maine newsletter via email

 \_\_\_\_receive MELNA news and updates via email

 (Changes to these preferences may be made at any time.)

 **AMOUNT DUE:** **$**\_\_\_\_.00

Please see next page for Dues Submittal Form.

Please fill out and verify information on all three pages of this Form. Return this Form, along with payment, to:

DONALD F. SPROUL, EXECUTIVE DIRECTOR

MAINE LANDSCAPE & NURSERY ASSOCIATION

P.O. BOX 4666

AUGUSTA, ME 04330

 E-Mail: mngmtplus@aol.com



# DUES SUBMITTAL FORM

**ANNUAL DUES:** $\_\_\_\_\_\_\_.00

Optional donation to support the

ANLA Lighthouse Fund $10.00 $\_\_\_\_\_\_\_.\_\_\_

Voluntary Contribution to the

Plant Something marketing program $\_\_\_\_\_\_\_.\_\_\_\_

Voluntary donation to the MELNA

Scholarship Fund $\_\_\_\_\_\_\_.\_\_\_\_

Voluntary donation to the MELNA Endowment Fund $\_\_\_\_\_\_\_.\_\_\_\_

Voluntary donation to the OHC Endowment Fund, for more info see www.ohcmaine.com $\_\_\_\_\_\_\_.\_\_\_\_

 **Total enclosed** $\_\_\_\_\_\_\_.\_\_\_\_

❏Check enclosed, made out to MELNA, check number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❏Visa or Master Card Only

\_\_ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

Expiration Date: \_\_\_\_\_\_ / \_\_\_\_\_\_

3-digit security code \_\_ \_\_ \_\_ (back of card)

❏\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Credit Card billing address, if different from business address

# *MELNA Membership Dues Categories*

**Active** – Active membership is a corporate level membership for any Maine based company or individual proprietor that derive the majority of their income from practicing in the field of horticulture and allied professions. Maine Certified Professionals may join as Active Member only if their company is not an Active Member. Only Active Members are allowed a voting interest in the governance of MELNA. $200 per year.

**Allied** - Allied membership is a corporate level membership for all suppliers' companies, as well as out of state nurseries, landscape companies, and other out of state green industry professionals who want to join MELNA. Allied members receive all the benefits of Active members except for voting rights. $200 per year.

**Associate** - Associate membership is for individuals who are engaged in or allied with the green industry, but who are not joining as a business. Examples would be educators, government employees, employees of a company who is a member, employees of a company who is a non-member, landscape architects, landscape designers, horticultural therapists, master gardeners, etc. Any member discounts of benefits do not extend beyond the individual who is an associate member. Maine Certified Professionals may join as Associate Member. $43.00 per year.

**Student** - Student membership is for students enrolled as a degree student in horticulture at an accredited college or university. $16.00 per year.

Active Members hold the right to vote; all members shall be permitted to attend meetings of the Association, whether executive committee, special or annual and shall be accorded all privileges and obligations of membership.

All memberships expire on June 30. Renewal invoices are typically mailed in June; with memberships not renewed by July 31 considered to be lapsed at that time.

For new members joining From Dec. 1 through Feb 28, only 50% of dues is required for membership through June 30.

For new members joining from March 1 through June 30; pay one year’s dues and your membership will be good through June 30 of the FOLLOWING year (up to 16 months membership for one year’s dues).