

MEMBERSHIP RENEWAL APPLICATION
SHASTA GROWERS ASSOCIATION
(Please Type or Print Clearly)

NAME _____ Spouse's Name _____

BUSINESS NAME _____

MAILING ADDRESS _____

PHONE _____ FAX _____

CELL PHONE _____ E-MAIL _____

DESCRIPTION OF ITEMS FOR SALE _____

As member in good standing of the Shasta Growers Association you shall:

- A. Submit a \$30.00 membership fee along with this completed application.
- B. Provide copies of all necessary permits and licenses to the SGA, to be kept on file at the market(s).
- C. Post all original certificates, permits and licenses clearly, while selling at market.
- D. Notify the market manager by phone at (530) 226-7100 two days prior to your first attendance at market.

Having read and understood the above application, I request permission to sell at the Redding Certified Farmers' Market. I have read and understand the Shasta Growers Association Rules and Regulations (available at shastagrowersassociation.com) and agree to abide by them and to cooperate fully with the Board of Directors and Market Manager. I fully understand that failure to do so will result in my dismissal from the market.

SIGNATURE _____ DATE _____

Date Accepted _____ Paid ___ Cert. Ag. ___ Non Cert. Ag. ___ Craft ___ Food ___

Redding Certified Farmers' Market/Shasta Growers Association
P.O. Box 990187, Redding, CA 96099-0187