



MEMBERSHIP APPLICATION

Annual Membership Dues - \$20.00

Date: _____

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Telephone: _____ Cell: _____

Fax: _____

E-Mail: _____

Crops grown: _____

Acres: _____

Signature: _____

Return completed application with check to:

MFVGA - Attn: Teri McCarter
143 Countryside Cove
Madison, MS 39110

Information:
Telephone: 601-955-9298
Email: teribmc@bellsouth.net