



2019 MEMBERSHIP APPLICATION

NAME: _____

COMPANY OR FARM NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL ADDRESS: _____

TELEPHONE: _____ CELL PHONE: _____ FAX: _____

MAJOR CROPS:

ANNUAL MEMBERSHIP DUES

Please check the appropriate category below

- RESEARCHER / SUPPORTER - \$15 COMMERCIAL GROWER / SHIPPER - \$75
 DIRECT MARKET GROWER - \$25 SALES AGENT / ALLIED INDUSTRY ASSOCIATE - \$100

Checks or money orders should be made payable
to the **SC Peach Council** and sent to:

SC Peach Council
Attn: Kyle Tisdale
P.O. Box 11280
Columbia, SC 29201

For questions or more information, please contact:

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803-734-0347