



Membership Registration

Farm/Entity Name _____

Contact Name _____
Shirt Size _____

Mailing Address _____

Email _____

Home Phone _____

Cell Phone _____

Facebook _____ Instagram _____

*Secondary Contact _____
Shirt Size _____

Secondary Email _____

Secondary Phone _____

Facebook _____ Instagram _____

Membership Type (Circle One)

Supporter (Includes Caregiver/Patient)	\$100
Non-Cannabis Business	\$500
Cannabis Industry Business	\$1,000
Farm I (up to 5000 sq ft)	\$1,000
Farm II (5001 - 10,000 sq ft)	\$2,500
Farm III (10,001 - 22,000 sq ft)	\$5,000

*secondary contact may attend meetings with the member or in lieu of the member

P.O. Box 1238
San Andreas, CA 95249