



MEMBERSHIP APPLICATION

DIRECT GARDENING ASSOCIATION
5836 Rockburn Woods Way
Elkridge, MD 21075
410-540-9830 P • 410-540-9827 F
grow@directgardeningassociation.com
www.directgardeningassociation.com

Please complete all sections.

Applying for the following Membership type (select one):

- REGULAR:** Companies engaged in the direct selling of gardening products to the consumer.
- WHOLESALE:** Companies that primarily sell gardening products to a regular member or other retailers for resale.
- ALLIED:** Companies that provide services to regular and wholesale members including printing, shipping, internet, Advertising, public relations, and marketing. Includes both consumer and trade publications serving the industry.

FIRM NAME: _____ # of Catalogs Mailed Annually: _____
(optional)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ BUSINESS PHONE: _____

FAX: _____ WEBSITE: _____

HOW DID YOU HEAR ABOUT THE MGA? _____

DID A MGA MEMBER ENCOURAGE YOU TO JOIN? YES NO IF YES, WHO? _____

ADDITIONAL COMPANY CONTACTS TO BE LISTED IN THE ASSOCIATION MEMBERSHIP DIRECTORY:

1) _____ TITLE: _____ EMAIL: _____
Primary Contact

2) _____ TITLE: _____ EMAIL: _____

3) _____ TITLE: _____ EMAIL: _____

CONTACT TO RECEIVE ANNUAL DUES NOTICE (If different from Primary Contact listed above):

NAME: _____ PHONE: _____ EMAIL: _____

BRIEF COMPANY DESCRIPTION (Will appear on the MGA Website) - 50 words or less:

(turn over →)

Your DGA Membership Application may be submitted securely via the DGA Website or mailed to the DGA office.

If you are a **REGULAR (Direct to Consumer)** membership please check those categories below that you wish to be listed under in the garden catalog guide on the website:

- | | |
|---|--|
| <input type="checkbox"/> Annuals | <input type="checkbox"/> Gifts and Decorative Accessories |
| <input type="checkbox"/> Bulbs | <input type="checkbox"/> Greenhouses and Indoor Gardening Supplies |
| <input type="checkbox"/> Perennials | <input type="checkbox"/> Ground Covers, Shrubs, Trees and Vines |
| <input type="checkbox"/> Aquatic Plants and Water Gardens | <input type="checkbox"/> Herbs and Vegetables |
| <input type="checkbox"/> Exotic Plants and Flowers | <input type="checkbox"/> Irrigation Supplies and Equipment |
| <input type="checkbox"/> Fertilizer, Weed and Pest Control Products | <input type="checkbox"/> Magazines and Books |
| <input type="checkbox"/> Flower, Vegetable and Wild Flower Seed | <input type="checkbox"/> Ornamental Grasses |
| <input type="checkbox"/> Fruit Trees and Berries | <input type="checkbox"/> Roses |
| <input type="checkbox"/> Garden Supplies, Tools and Power Equipment | <input type="checkbox"/> Other |

SCHEDULE OF ANNUAL DUES

REGULAR MEMBERS (Dues based on Gross Mail Order Sales Annually)

Under \$250,000 and in business for three years or less\$175.00
*****Only applicable for a 1st Year Membership***** Incorporation Date: _____

Under \$250,000 \$ 325.00
 From \$250,000 to \$1,000,000 \$ 525.00
 From \$1,000,000 to \$4,000,000 \$ 725.00
 From \$4,000,000 to \$8,000,000 \$1025.00
 From \$8,000,000 and above \$1275.00

WHOLESALE MEMBERS \$ 395.00
ALLIED MEMBERS \$ 395.00

The undersigned hereby applies for membership in the Mailorder Gardening Association and agrees to be governed by the Bylaws of said Association.

Name (Printed): _____ Signature: _____

PAYMENT INFORMATION - This application may be submitted securely online via the DGA website or mailed to the DGA office.

Enclosed is payment for \$ _____ to cover the cost of membership. (DGA's fiscal year is November 1—October 31)

Check Enclosed Credit Card (Check One: VISA Master Card)

CREDIT CARD NUMBER: _____ EXP DATE: _____

PRINTED NAME (as if appears on card) : _____

COMPANY NAME (if Corporate card): _____

CARD BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SIGNATURE (Required): _____

The above signed agrees to pay the charges according to the card issuer agreement.

For office use only:

Date received: _____ Check No.: _____ Amount Paid: _____

Approval No. _____ Reference No. _____