



APPLICATION FOR MEMBERSHIP

Florida Foundation Seed Producers, Inc. (FFSP) was organized as a non-profit corporation in 1957. The purpose of FFSP is as follows:

1. *To make available annually to Florida farmers and producers of crop seed and nursery stock, foundation seed stock of the best known varieties adaptable to Florida climate and soils in adequate quantities and at reasonable prices.*
2. *To cooperate with the Florida Agricultural Experiment Station of the University of Florida in making available to residents of Florida new and improved varieties of crop seed and nursery stock and to obtain such improved seed stocks by purchase, barter, lease, or gift; to propagate and increase the same through any agency and particularly by contracting with producers and institutions; and to disseminate such increased stocks to its members and others*
3. *To receive, hold, invest, and administer property and to make expenditures to or for the benefit of the University of Florida.*

Application for membership in this association shall be admitted upon such conditions as may be prescribed by the Board of Directors, consistent with its By-Laws, and membership shall be restricted to farmers, nurserymen, and seed producers, who shall patronize the association. Having read and understood the aforementioned purposes, I wish to be awarded all rights and privileges extended to members of this association.

Any other persons or firms who are interested in patronizing the Corporation but who are otherwise not eligible for membership may be admitted as associate members.

Company Name (if applicable): _____
 Name or Company Representative: _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____ Phone: _____
 Email: _____ Seed Dealer/Nursery License (if applicable): _____

Type of Business (check all that apply):	Area(s) of Interest(check all that apply):
Seed Grower: _____	Agronomic Crops: _____
Contract Seed Producer: _____	Forage Crops: _____
Seed Processor: _____	Fruit Crops: _____
Nurseryman: _____	Vegetable Crops: _____
Wholesale/Retail Seed Distributor: _____	Ornamentals: _____
Fruit Producer: _____	_____
Fruit Marketer/Packer: _____	_____
Check here if this is an application for Associate Membership: _____	_____

Please find my check for \$25.00 for the application fee. I understand a membership fee of \$25.00 per year will be assessed upon approval of my application and each year thereafter, on October 31st.

Signature _____
 Date

Print Name: _____

Title: _____

Please mail signed application and check to FFSP, P.O. Box 309, Greenwood, FL 32443