

Membership Application

Missouri Nut Growers Association

Name: _____ Spouse: _____

Address: _____ City: _____

State: _____ Zip: _____

Telephone: _____ Email: _____

We manage: _____ acres of nut trees in _____ (County) in _____ (State)

We grow:

(Check all that apply) Walnut ; Pecan ; Hickory ; Chestnut ; Other nuts (list)

We sell nuts: (Check all that apply) Wholesale ; Retail ; Not at this time ;

Special scion wood: Looking for _____;
Available _____;

Please check which of the following should **not** be included in the next MNGA list:

Address ; Telephone ; Email ; Species grown: ; Sales info: ;

Payment enclosed to cover:

Years	Total
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(\$15/year) x _____ = \$ _____ MNGA annual dues with **e-mailed PDF** newsletter

or

(\$20/year) x _____ = \$ _____ MNGA annual dues with **mailed PRINTED** newsletter

(\$20/year) x _____ = \$ _____ (optional) *Pecan Grower* magazine (6 issues/year)

\$ _____ (optional) Voluntary contribution to Special Fund

Total = \$ _____

Action In Agroforestry Newsletter from MU Center for Agroforestry (check if you would like to receive this **free e-mail** publication. Make sure your e-mail is listed above)

Make checks payable to:
MNGA or The Missouri
Nut Growers Association

Mail to:
Wayne Herring
120 Dene Drive
Columbia, MO 65201