JEFFERSON COUNTY TRUCK GROWERS ASSOCIATION

Alabama Farmers Market 344 Finley Avenue West Birmingham, AL 35204 P 205-251-8737 F 205-251-8106

We are pleased in your interest in becoming a member of the *JEFFERSON COUNTY TRUCK GROWERS ASSOCIATION*. You have made a decision to partner with other Alabama Farmers to help provide locally grown fresh produce to the surrounding areas. Thank you for your dedication and hard work.

□ Complete and return the membership application
 □ Complete and return an annual crop report
 □ Copy of current years grower's permit (which can be obtained from the county extension office where your farm is located)
 □ Signed acknowledgment of receiving the rules & regulations
 □ Attach a check for \$150.00 made out to JCTGA
 To clarify regarding the \$150.00 application fee, the \$100.00 Farm Certification Fee is non-refundable. However, the remaining \$50.00 Application Fee will

Fee is non-refundable. However, the remaining \$50.00 Application Fee will apply as your first year's membership dues upon board approval. Once received, your paperwork will be presented at the next Board Meeting for approval. If you have any further questions or concerns, I may be contacted at (205)251-8737.

Sincerely,

Kevin Sims Operations Manager

JEFFERSON COUNTY TRUCK GROWERS ASSOCIATION MEMBERSHIP APPLICATION

NAME:		DATE OF BIRTH	DATE OF BIRTH:		
ADDRESS:					
CITY:	STAT	E:ZIP CODE:			
LOCATION OF FARM:		FARM NUMBER:	FARM NUMBER:		
PLEASE LIST OF MAIN CROP	S &/OR PRODUCT TO BE	SOLD AT THIS FACILITY IN T	HE UPCOMING YEAR:		
PRODUCT:	AMOUNT:	PRODUCT:	AMOUNT:		
PLEASE LIST THE CROPS &/0		OLD THROUGH THIS MARI	KET IN THE PAST YEAR:		
DO YOU ENGAGE IN BUYING			NO		
I CERTIFY THE INFORMATIO BY THE RULES AND REGULA MEMBERSHIP DUES ARE \$5 APPLICATION. I ALSO UNDE CERTIFICATION/INSPECTION	TIONS OF THE JCTGA ASS 0.00 PER YEAR AND MUS ERSTAND THAT I MUST PA	OCIATION. I UNDERSTAND T BE PAID AT THE TIME OF	THAT THE ANNUAL SUBMITTING MY		
SIGNED:		DATE:			

JEFFERSON COUNTY TRUCK GROWERS ASSOCIATION ANNUAL CROP REPORT

Farmer's Nam	ie:			
CROP	ACREAGE	EXPECTED PLANT DATE	EXPECTED HARVEST DATE	CROP/FIELD ADDRESS/ FARM#
CROP	ACREAGE	EXPECTED PLANT DATE	EXPECTED HARVEST DATE	CROP/FIELD ADDRESS/ FARM#
F/	ARM SUBJECT	TO INSPECTI	ION AT ANY TI	ME
Signature:				
Date:				