

FORT ROSS-SEAVIEW WINEGROWER ASSOCIATION

GROWER MEMBER - MEMBERSHIP APPLICATION

Name of Grower Member Applicant:

Vineyard:

Mailing address:

City:

State:

Zip:

Home #:

Work #:

Mobile #:

E-Mail:

FAX:

Website:

Varietals Grown:

Acreages for each Varietal:

Interested in serving as a director or officer or committee member? (Circle One) Yes No

I do not have an email address and request meetings notices be sent by regular mail to the following address:

Designated Representative. [Each Grower Member who is not an individual shall designate in writing an individual ("Designated Representative") who shall exercise the voting rights and other privileges on behalf of the member.

Name of Designated Representative:

By applying to become a Grower Member of the Fort Ross-Seaview Winegrowers Association, I/we agree to support the purposes of the Association and abide by the bylaws of the Association.

Signature of Applicant

Date

Please mail your signed Membership Application to:

Fort Ross- Seaview Winegrowers Association
c/o Daniel Schoenfeld
30904 Bohan Dillon Road
Cazadero, CA 95421

Or fax it to 1(707) 847-3687

Or scan it and email back to: daniel@wildhogvineyard.com