

Loudoun Valley HomeGrown Markets Cooperative, Inc.
PO Box 3238 Leesburg, VA 20177
540-454-8089

LVHMC, Inc. Membership Application

Calendar Year: _____

Farm/Producer Name _____

Contact(s) _____

Mailing Address

City _____ State _____ Zip _____

Farm/Producer Address (if different from mailing address)

Home Phone _____ Cell Phone _____

Business Phone _____ Fax _____

Email _____

I am a New Member of LVHMC

I have been a LVHMC (or previously, Association) member for approx. _____ year(s).

Types of LVHMC Membership (Please check the one that applies to you):

Farm Based Member - Producer of agricultural, horticultural or animal husbandry, farm based products. This is a voting membership. Dues are \$25 a calendar year Jan-Dec.

Non-farm Based Member - Producer of non-farm based products. Sales of these products are subject to approval by the LVHMC Board of Directors. This is a voting membership. Dues are \$25 a calendar year Jan-Dec.

Sustaining Member - Any person, partnership, firm, cooperative or corporation not actively engaged in selling at LVHMC markets, but wishing to further the aims of the cooperative, is welcome to contribute to LVHMC. This is not a voting membership.

I am applying for membership in the Loudoun Valley HomeGrown Markets Cooperative, Inc. and agree to comply with the bylaws and terms of agreement of the cooperative.

Signature

Date