



ASSOCIATE MEMBERSHIP APPLICATION

Company Name _____

Contact Person _____

Street Address _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone _____ Cellular Phone _____

E-mail Address _____

Signature

Date

AREAS OF INTEREST:

- Marketing Resources Special Events
 Legislative Membership

DUES: \$1,000 for fiscal year 2021 - 2022 October 1 through September 30.

Start date to be completed by CCM staff: _____

AMOUNT ENCLOSED \$ _____ (Make checks payable to CCM)

**MAIL CHECK TO: CALIFORNIA CITRUS MUTUAL
512 N. KAWEAH AVE.
EXETER, CA 93221-1200**