



MEMBERSHIP APPLICATION

2026

Payment due on or before February 15. \$15 late fee after February 15. Dues are in effect January 1-December 31.

Please Check One: Current Member New Member

Name: _____

Name of Business: _____

Address: _____

City: _____

Zip Code: _____

Email: _____

Cell Phone: _____

Please Complete your BUSINESS INFORMATION Check here if no changes from previous year.

Areas Served (Cities, Counties) _____

Services and Specialties

Business Website: _____

Business Phone: _____ Business Email: _____

Check here if you want FREE WEBSITE ADVERTISING.

Please note: Your information will appear exactly as you submit on this form. No edits will be made.

Ck	Member Category	Amount	#	Total Due
	Primary Member	\$40.00		
	Associate Member: Please list each person's name. Use back side if necessary.	\$10.00 per person		

DEADLINE: <i>On or before February 15. \$15 late fee After February 15.</i>	PAY BY CHECK: Mail application and check to: Association of Professional Gardeners 3651 Connors Drive Rochester Hills, MI 48307	PAY BY ZELLE: Email application to: apgtreasurer2025@gmail.com
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