



**Guilford Agricultural Society
Membership/Donation Application**

I (We) would like to become:
Annual Member(s) @
\$15.00 each per year

_____ "A Friend of the Fair"
Enclosed is my donation check
for \$ _____
(Donations are tax deductible)

_____ Business Contributor
Enclosed is our donation check
for \$ _____
(Donations are tax deductible)

Please make checks payable to: Guilford Agricultural Society, Inc

Name: _____ Date: _____

Street: _____ Tel#: _____

City: _____ State: _____ Zip: _____

Email: _____ Member Sponsored By: _____

The Guilford Agricultural Society, Inc is a 501 (C) (5) Organization

Mail checks to: Guilford Agricultural Society, Inc
c/o Darka Lindgren/Membership
30 West Lake Ave., Guilford, CT 06437

By signing this application I hereby agree to and understand that I am required to perform 10 hours of volunteer time to the Society other than just during the fair and attend at least 4 meetings a year.

Signature: _____