



2011 Florida Citrus Mutual Allied Member Application

Company Membership and Contact Information:

This information will appear in the Allied Membership Directory on an annual basis.

Company _____

Contact Name _____

Address _____

City, St, Zip _____

Phone _____ Fax _____

E-mail _____ Website _____

Check here If you would like to serve on the Allied Committee.

Description of company/product/service for publication (limit 30 words).

List up to two (2) other contacts that would like to receive a *Triangle* subscription.

Name _____

Address _____

City, St, Zip _____

Phone _____

Fax _____

E-mail _____

Payment information:	Annual Dues	\$ <u>250.00</u>
	Full or 1/2 page Directory Ad	
	(See attached form)	\$ _____
	Total	\$ _____

Submit completed application form with payment to:

Melanie Burns, Director Market Information
Florida Citrus Mutual
PO Box 89

Lakeland, FL 33802-0089

Phone: 863-682-1111 x 212 Fax: 863-682-1074 Website: www.flcitrusmutual.com

Advertisement Information For annual directory

If you would like to place an ad in the 2011 directory to be printed in Nov/Dec. 2010, please check either Full page (5.25" x 8.25") or Half page(5.25" x 4") below.

_____ Full Page Ad	(5.25" x 8.25")	\$350
_____ Half Page Ad	(5.25" x 4")	\$250

In order to properly place your business in the 2010 directory

Place an X next to the service(s) your company provides:

_____ Accounting	_____ Financial/Investments
_____ Ag Equipment/Manufacturer/Supplier	_____ Fundraising
_____ Association	_____ Futures & Options Trading
_____ Auction	_____ Grove Management & Care/Harvesting
_____ Bank	_____ Insurance/Title Insurance
_____ Citrus By-Products/Juices/Raw Materials	_____ Legal/Lobby
_____ Citrus Nursery	_____ Marketing/Publications
_____ Citrus Processing Plant	_____ Real Estate/Appraisal
_____ Consulting	_____ Research
_____ Crop Protection/Chemicals/Fertilizers	_____ Technology
_____ Education	_____ Weather Services
_____ Employer & Staffing Services	_____ Other _____

Did you remember to?

- Return the Membership Form
- Enclose a check for the total amount of Annual Dues and/or Advertisement Cost
- E-mail Company Logo (.GIF or JPEG) for website to Tamara Wood at tamarac@flcitrusmutual.com
- E-mail Ad (in camera ready format) for directory to Melanie Burns at melanieb@flcitrusmutual.com

Florida Citrus Mutual • PO Box 89 • Lakeland, FL 33802
Phone (863) 682-1111 • Fax (863) 682-1074
www.flcitrusmutual.com

*For the rights and duties of the various classes of membership, please see the company's charter and by-laws.