

PLANT

PROFESSIONAL LANDSCAPE
ASSOCIATION OF NASHVILLE TENNESSEE

MEMBERSHIP APPLICATION

Name: _____

Title: _____

Organization/Company: _____

Street Address: _____

City, State, Zip: _____

Mailing Address (if different): _____

Work Phone: _____

Fax: _____

Email: _____

Website: _____

\$60 Annual Membership. Dues payable in January of each year, and are used to publish newsletters, fund speakers, and meeting expenses.

Check one:

Endorsed Member - Requires copy of Current Business License and Current Certificate of Business Insurance. A free company web page is included and additional info will be requested.

Affiliated Member - Any employer, self-employed person, or employee in the lawn and landscape industry wishing to join but not meeting the above requirements.

General Member - Any individual who loves lawns and landscaping and wants to enjoy the benefits of informational meetings and updates.

PLANT Vendor/Supplier - NO MEMBERSHIP FEE for vendors who actively support PLANT organized events.

Please sign up online at www.landscapenashville.org or complete form and mail to:

PLANT
Bob Mills, Treasurer
PO Box 280496
Nashville, TN 37228-0496