



It's Time to Renew Your Membership!

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2026 OPGMA MEMBERSHIP APPLICATION

COMPANY INFORMATION			
Company:		Company Contact:	
Mailing address:		City:	
State:	Zip:	County:	Phone:
Company Email:		Cell Phone:	
If you sell, to whom do you sell? ☐ Direct to Consumer ☐ Wholesale ☐ Both			
What is your primary business interest? (Mark only one)			
☐ Fruit Grower	☐ Fruit & Vegetable Grower	☐ Farm Market	☐ Government
☐ Vegetable Grower	☐ Ag Marketer	☐ Farmers' Market	☐ Institution
		☐ Educator	☐ Exhibitor
			☐ Student
			☐ Other _____
OPGMA MEMBERSHIP		Please list out each type of product that you produce:	
Gross Sales	Fees	☒	
Tier 1 - Up to \$225,000	\$145		
Tier 2 - \$225,000 to \$500,000	\$240		
Tier 3 - \$500,000 to \$1 million	\$360		
Tier 4 - \$1 million and up	\$480		
Supporter – Retired, educator, researcher	\$60		
Industry Partner	\$145		
Sedgwick Affiliate Member	\$145		
Donation to OPGMA Scholarship Fund			
MEMBERSHIP TOTAL			
HOW WOULD YOU LIKE TO RECEIVE INFORMATION?			
**This includes newsletters, emails, association updates, etc.			
☐ Email ☐ US Postal Mail			
ADDITIONAL COMPANY MEMBERS – CONSIDERED A SUPPORTER (\$50 EACH)			
**will each receive newsletters and additional OPGMA information			
Name:		Email:	
Name:		Email:	
Name:		Email:	
Name:		Email:	
Name:		Email:	
PAYMENT INFORMATION			
Payment Type: ☐ Visa ☐ M/C ☐ Discover ☐ AMEX ☐ Check/Money Order (payable to OPGMA)			
Billing Address:			
Name on Card:		Card Number:	
Exp Date:	CVV Code:	Signature:	