



**Business memberships**

*Open to the following businesses or organizations which are actively engaged in the urban ag industry.*

**Contractor/grower/sod producer**

*(Dues based on annual gross sales revenue)*

- Contractor-I - under \$1 million ..... \$250
- Contractor-II - between \$1- \$2 million ..... \$350
- Contractor-III - between \$2 - 5 million ..... \$525
- Contractor-IV - over \$5 million & national corporations . . \$875

**Athletic field/golf course/institutional/  
municipal organization/association**

..... \$350

**Vendor**

*(Dues based on annual gross sales revenue)*

- Vendor-I - under \$2 million..... \$350
- Vendor-II - between \$2 - 5 million ..... \$525
- Vendor-III - over \$5 million and national corporations . . \$875

Membership fee includes all employees of the business, department or facility; one vote per company in association matters.

**Individual memberships**

*To be listed by company or institution's name on the UAC website/database and receive discounted registration, exhibitor and advertising fees, please join at the appropriate business membership level above.*

**Independent professional** ..... \$95

Individuals (cannot be the owner or principal of the company) whose companies or organizations are not UAC members. Membership is in the individual's name only, not the company or institution's name; this membership is non-voting in association matters.

**Educator/student** ..... \$40

Educators and students (proof of teaching/enrollment in higher ed landscape/hort/turf program required); this membership is non-voting in association matters.

**UGA Cooperative Extension personnel**

Complimentary membership; please contact the UAC office to apply.

**Member benefits**

- Legislative and regulatory advocacy and representation
- Web profile page on [www.urbanagcouncil.com](http://www.urbanagcouncil.com) searchable "Find A Professional" database
- UAC Safety School program and training
- UAC Safety Zone Awards program
- *UAC Magazine* - print and online, six issues annually (one copy per company; additional print subscriptions are available for \$25 per year)
- Industry updates via email
- *UGA Turfgrass Pest Control Handbook*
- Marketing pkg./framed membership certificate
- Electronic copies of UAC logo

**Also available (additional fees apply)**

- Eligible for UAC Workers Comp insurance program through WS Pharr/Builder
- UAC Professional Landscape Awards program
- Monthly dinner meetings and other networking opportunities throughout Georgia
- Advertise in UAC publications at member rate
- Sponsor UAC dinner meeting and awards banquet
- Discounted registration and/or exhibitor fee for tradeshow, field days and other UAC events

**Member benefits**

- Legislative and regulatory advocacy and representation
- UAC Safety School program and training
- Online *UAC Magazine*
- Industry updates via email
- *UGA Turfgrass Pest Control Handbook*
- Membership certificate

**Also available (additional fees apply)**

- Monthly dinner meetings and other networking opportunities throughout Georgia
- Print copy of *UAC Magazine* (six issues annually, \$25 per year)

## Apply for a UAC membership

1. Read and agree to the UAC Code of Ethics.
2. Fill in your member profile.
3. Select membership level and payment method.
4. Mail completed application and first year's membership dues to Georgia Urban Ag Council, PO Box 817, Commerce GA 30529 or fax application with credit card information to 706.336.6898. You will receive an email confirmation of your application and notification once membership has been approved.

**Unless otherwise noted, all information is required for all members.**

### Step 1 of 4

#### UAC Code of Ethics

As a member of UAC, I will strive to adhere to the following principles:

- To promote honesty and professionalism at all times, realizing my first and foremost responsibility is to my customers and fellow employees.
- To promote and encourage standards and management practices that will foster improvements in the human environment through protection of our natural resources.
- To improve my skills and knowledge and to encourage education and research.
- To improve public perception through the promotion of and involvement in my industry and this association.
- To conduct my business in a nondiscriminatory manner.
- To foster a spirit of cooperation among members of the association and throughout the industry.

**I have read and I agree to UAC's Code of Ethics.**

Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_

### Step 2 of 4

Company name \_\_\_\_\_

#### Contact for web site profile for business-level members only:

*NOTE: The site profile email address is used for logging into the members site and will be the name/email address the public sees.*

First name \_\_\_\_\_ Last name \_\_\_\_\_

Email \_\_\_\_\_

Show email to site visitors:  Yes  No

#### Contact for UAC communications regarding payments, renewals and other info:

First name \_\_\_\_\_ Last name \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Cell \_\_\_\_\_ Website: http:// \_\_\_\_\_

**Licensure**

*The State of Georgia requires licenses for pesticide application. Contractor/Institutional, Vendor, and Affiliate members may include pesticide application in their UAC company web profile ONLY with valid license(s) and if information is provided here.*

Private Pesticide Applicator License # \_\_\_\_\_

Commercial Pesticide Applicator License # \_\_\_\_\_

Low Voltage Electrical License # \_\_\_\_\_

**Required for business-level members only**

**Information below is required for membership, but will be kept confidential:**

Federal Tax ID # \_\_\_\_\_

Business type:  Sole Proprietorship  Partnership  Corporation  Limited Partnership

State of incorporation \_\_\_\_\_

Date of incorporation/date business started \_\_\_\_\_

Business license number \_\_\_\_\_

Business county \_\_\_\_\_

**Insurance**

*Every employer, individual, firm, association, or corporation, regularly employing three or more persons, part-time or full-time, is required to provide workers' compensation insurance coverage.*

Number of employees \_\_\_\_\_

Required if number of employees is more than 3. Insurance carrier \_\_\_\_\_

Insurance type \_\_\_\_\_

**Company description**

Minimum service fee (if applicable) \_\_\_\_\_

Do you charge for an estimate?  Yes  No Amount charged \_\_\_\_\_

**Short company description** (50 characters maximum) *NOTE: This information will appear in membership directory.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Long company description** (optional but recommended) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Certification/affiliations**

- GCLP - Georgia Certified Landscape Professional
- Georgia Erosion and Sediment Control Certification
- Georgia Private Pesticide Applicator License
- Georgia Commercial Pesticide Applicator License
- GCPP - Georgia Certified Plant Professional
- ANLA - American Nursery and Landscape Association
- ASLA - American Society of Landscape Architects
- CIC - Certified Irrigation Contractor
- ISA - Certified Arborist
- PLANET - Professional Landscare Network
- CDFW - Certified Drug-Free Workplace
- Better Business Bureau

Other certification(s) or affiliation(s):

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**Step 3 of 4**

**Membership levels and annual dues**

Your annual renewal date is one year from the date you join; an invoice will be sent in advance of renewal date.

**See page 1 for category descriptions and benefits.**

**Business memberships**

- Contractor-I - \$250 - Contractors under \$1 million in annual gross revenue
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- Contractor-IV - \$875 - Contractors with gross revenue over \$5 million annually and national corporations
- Athletic field/golf course/institutional/municipal organization/association- \$350
- Vendor-I - \$350 - Vendors under \$2 million in annual gross revenue
- Vendor-II - \$525 - Vendors with gross revenue between \$2 - \$5 million annually
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**Individual memberships**

- Independent professional - \$95
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**Payment method**

A check payable to Georgia UAC has been enclosed with this contract.

Please charge my  Visa  MasterCard  American Express  Discover

Company name \_\_\_\_\_

Name on card \_\_\_\_\_

Billing address for card \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Credit card # \_\_\_\_\_

Exp Date: \_\_\_\_\_ Security code: \_\_\_\_\_

For Office Use Only	
Date received	_____
Amount received	_____
Payment method	_____

**Step 4 of 4**

Mail completed application and first year's dues to Georgia Urban Ag Council, PO Box 817, Commerce GA 30529 or fax application with credit card information to 706.336.6898. **Questions?** Call 800.687.6949.