



**Wisconsin & Upper Michigan Florists Association
Regular Member Application**

(Includes retail florists, wholesalers, growers)

Name _____ Date _____

Firm _____ E-mail: _____

Phone _____ Fax _____

Address _____

City _____ State _____ Zip _____

Website URL: _____

Your position: Owner Partner Other (please specify) _____

Length of time in above position _____ Sales Tax Exempt # _____

Display Refrigeration Size _____ (sq. ft.) Sales Area Size _____ (sq. ft.)

Wire Affiliations (please circle) FTD Teleflora BloomNet FSN Other _____

List 3 major suppliers _____

Please provide any other information that will help us process your application

Applicants Signature

WUMFA Approval Signature (date)

Regular Membership: \$95

(additional shops under same owner \$25; list address on reverse)

Return form with membership fee made payable to WUMFA:

Wisconsin & Upper Michigan Florists Association

PO Box 67 • Haslett, MI 48840

Phone: 517-253-7730 • Toll Free (844) 400-9554 • Fax: 517-575-0115

E-mail: info@wumfa.org • Website: www.wumfa.org