CALIFORNIA AGRICULTURAL TEACHERS' ASSOCIATION
CORPORATE MEMBERSHIP APPLICATION

BUSINESS/CORPORATE NAME: _____

CONTACT PERSON/TITLE: _____

STREET ADDRESS: _____

CITY/STATE/ZIP CODE: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

EMAIL: _____

COMPANY WEBPAGE: _____

One sentence description of your business: _____

_____

Please email your business card size ad to cata@calagteachers.org.
(.png format and 300 x 250 pixels)

We understand that CORPORATE MEMBERSHIP dues in CATA are $140.00 for a fiscal year (July through June).

( ) $140.00 check enclosed

( ) Credit Card Information: Credit Card Type: _____

_____ _____
Card Number: Expiration Date

_____ _____
Signature 3-Digit Code

Please make check payable to CATA.

Mail to: California Agricultural Teachers' Association
P.O. Box 186
Galt, CA 95632-0186

01.03.01
Rev: July 2023