

**Upper Midwest CRAFT Network (Region 1)**  
**Collaborative Regional Alliance for Farmer Training**

**Membership Form**

\_\_\_\_\_ Yes, I want to renew my membership in the Upper Midwest CRAFT Network. Enclosed is my membership fee entitling me to: free admission to all CRAFT Workshops and Events, reminders prior to all CRAFT events, inclusion in CRAFT network opportunity alerts, along with a copy of the 2008 CRAFT Handbook.

**2008 Membership Level**

**Not sure which one to choose?**

- \* Choose *Farm* if you have a Farm name and market even one product on land you own or rent.
- \* Choose *Friend of Craft* if you do not have a farm to grow or market product(s).

**Friend of CRAFT membership:**                    \$30.00            \$ \_\_\_\_\_

**CRAFT Farm membership:**                    \$25.00            \$ \_\_\_\_\_

Farmers may purchase additional memberships for their interns, trainees or employees for a reduced rate of only:                    \$10.00 each            \$ \_\_\_\_\_

Please accept my gift in the amount of:

\$25.00     \$50.00     \$75.00     \$ \_\_\_\_\_    \$ \_\_\_\_\_

(Assists with the costs of coordinating and implementing CRAFT)

**Total membership/gift enclosed:**                    \$ \_\_\_\_\_

Organization: \_\_\_\_\_

Contact(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_ Yes, I would like to receive a copy of the Prospective Farmer Questionnaire to seek employment or an internship on a CRAFT Farm.

\_\_\_\_\_ Yes, I've read the CRAFT farmer commitment statement on the reverse side of this form and I commit to enable my farmer interns/employees to participate in CRAFT orientations, workshops and exchanges.

Please mail this completed form and your check made payable to: *Angelica Organics Learning Center* to CRAFT Membership, Angelica Organics Learning Center, 1547 Rockton Road, Caledonia, IL 61011.