



Southern Cotton Ginners Association

874 Cotton Gin Place, Memphis, TN 38106
Phone (901) 947-3104 ~ Fax (901) 947-3103
www.southerncottonginners.org

A PARTIAL LIST OF.....

ASSOCIATE MEMBER BENEFITS

All ginners in Arkansas, Louisiana, Mississippi, Missouri and Tennessee are notified that you are supporting the ginning industry and their Association.

You will receive a blue book listing all gins in Arkansas, Louisiana, Mississippi, Missouri and Tennessee, along with their owners' or managers' names, telephone numbers, fax numbers and emails.

You will receive up-to-the minute information about developments in ginning and agriculture through our Newsletter and special bulletins.

You can request a set of address labels or SCGA staff will address your envelope, card, or mailing piece free once each year to all gins in the five states, or just the states you prefer....also county agents and associate members may be included. The Associate Member will be required to cover the cost of 1st class postage for the mailing.

Additional mailings may be made as often as you like for a nominal fee....addressing 2¢ per label, envelopes stuffed at 4¢ per insertion. The mailing may be stamped and delivered to the post office for 1¢ per piece plus the cost of 1st class postage.

You receive free tickets to the Mid-South Farm and Gin Show, the largest exhibit of farm machinery, gin machinery and agricultural products in the Mid-South....plus you receive priority in space selection for your exhibits.

You have available the research facilities of this Association in any matter concerning cotton and cotton ginning.

One year membership dues.....\$100.00



Southern Cotton Ginners Association

874 Cotton Gin Place, Memphis, TN 38106
Phone (901) 947-3104 ~ Fax (901) 947-3103
www.southerncottonginners.org

ASSOCIATE MEMBERSHIP APPLICATION

Please complete this application and mail to:

Southern Cotton Ginners Association
874 Cotton Gin Place
Memphis, TN 38106
901-947-3104 Fax 901-947-3103

Name of Firm _____

Street Address _____

City _____ State _____ Zip Code _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

E-mail _____ Website _____

Mail all information to the attention of: _____

OUR PRODUCT(S) AND/OR SERVICE(S): Please describe, **in one sentence**, detail of your business product and/or service to be listed in the Associate Member book.

Date _____ Signed _____

Title _____