

CONTACT DETAILS

Complete as appropriate

Name (primary contact)

Company

Postal address
(including postcode)

Email

Mobile

Landline

**Return completed form to CUPGRA
at the address or email below**

MEMBERSHIP CATEGORY

Complete as appropriate

Grower

Area (ha)

Independent agronomist

Area (ha)

Breeder/seed supplier

Packer and supply chain

End user

University and research

Input and service provider

Other

ADDITIONAL NAMED MEMBERS FOR MAILINGS, ANNUAL REPORT AND MEMBER RATES

NAME

EMAIL ADDRESS

MOBILE

IN ASSOCIATION WITH:

