

MAINE SEAFOOD ALLIANCE

Membership Application Form

Please complete the following information and enclose this form with a check for the amount specified according to the membership category shown below.

Make your check payable to:
Maine Seafood Alliance
C/O Down East RC&D
PO Box 210
Cherryfield, ME 04622

If you have questions about MSA membership or this application, please contact us at (207) 546-2368.

Your Name: _____

Business Name (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ Cell: _____

Email Address: _____

Web Site: _____

(Would you like your web site listed with your member listing on the MSA Web Site? yes ___ no ___)

The information you provide is used solely for the purposes of establishing your membership and keeping you informed of current MSA news and information. We will not share your contact information with any third parties.

CHOOSE A MEMBERSHIP CATEGORY

- \$25.00 - Individual Harvester
- \$100.00 - Contributing Member or Affiliate group (i.e.-local shellfish committee)
Organizations please include a membership list.
- \$250.00 - Non-Certified Seafood Dealer
- \$250.00 - Associate Member – supporting businesses or organizations
- \$500.00 - Certified Seafood Dealer/Processor

We thank you for your support and look forward to your participation as a valued member of the Maine Seafood Alliance. Together we will make our voices heard!

www.maine seafood alliance.org