



Associate Membership Form

PEI Wild Blueberry Growers Association

Name: _____

Farm Name: _____

Address: _____

Home Phone: _____ Fax: _____ Cell: _____

Email: _____

Preferred method of contact:

☐ Home Phone ☐ Fax ☐ Cell ☐ Email ☐ Postal Mail

Would you like to share this information with the PEI Department of Agriculture?

☐ Yes ☐ No

Would you like to receive free issues of The Grower, Fresh Thinking, and other publications?

☐ Yes ☐ No

Membership forms can be sent to:

PEI Wild Blueberry Growers Association

159 Sherwood Road, Suite 100

Charlottetown, PE

C1E 0E5

Phone: (902)368-7289 Fax: (902)368-7204

Email: joann@peifa.ca Website: www.peiwildblueberries.com