

# GERTEN GREENHOUSES

It's only natural to buy from the grower!

## FUNDRAISER ACCOUNT APPLICATION

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About your group/organization:

Fundraiser Group Name: \_\_\_\_\_

Primary Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing/Billing Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Is your group/organization tax exempt? \_\_\_\_\_ Yes \_\_\_\_\_ No

\*Sales tax exemption requires a completed ST3 form on file.

Names of Persons authorized to use this account:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you prefer fundraising information (seasonal packets) to be mailed to an address other than the billing address please list below:

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

By initializing the box below, I confirm that I have entered my own name as contact person, and that I am authorized to conduct business with Gertens on behalf of my school, church, or organization.

