

2023

Calhoun County Agricultural & Industrial Society Membership Application

Effective January 1, 2023 through December 31, 2023

Membership Applications must be filled out completely and signed to be valid

Memberships and benefits are nontransferable and nonrefundable

The mission of the Calhoun County Agricultural & Industrial Society is to preserve its agricultural heritage; to foster connections between agriculture, business, education, industry, and technology; and to engage an ever-increasing number and diversity of people from across the county and beyond.

Primary	Member						1	Date of Birth		
Mailing Address										
City						State			Zip	
Phone				Email					_	
l am a:	Renewing Member New Member				er					

Membership Level (select one):

O Base - \$25 each individual (Includes quarterly newsletter, and voting rights)

O Patron - \$100 (Includes quarterly newsletter, voting rights, Friend of the Fair Sponsorship, and 1 free printed fair book and one weekly fair pass)

O Patron Plus - \$175 (Includes 2 memberships, quarterly newsletter, voting rights, Friend of the Fair

Sponsorship, 1 free printed fair book, and 1 reserved parking spot for fair week)

Secondary Member								Date of Bir	th			
Mailing Address												
City						State			Zip			
Phone				Email								
I am a:	⊖ Rer	Renewing Member New Member										
Payment Method:												
	○ Cash ○ Credit Card: Number											
								Billing Zip Code:				
CCAIS Members are encouraged to attend Fair Board Meetings, which are held the third Wednesday of each month. Members are also entitled to voting rights at the Annual Membership Meeting. Bylaws and Meeting Minutes can be found online at www.CalhounCountyFairgrounds.com.												
By signing below, I/we accept membership into the Calhoun County Agricultural & Industrial Society and that the standards are limited to persons of good moral character and reputation. I/we recognize the importance of rendering personal service to my/our community in cooperation with other civic-minded individuals. I/we attest that I/we am/are at least eighteen years of age and that I/we am/are submitting this Membership Application on my/our own free will.												
Primary Member Signature: Date:												
Secondary Member Signature: Date:												
OFFICE	USE:											
Dues Pa	aid \$	D	Database				_	Fair Wee	Fair Week Pass(es) Patron Plus			
Date	,,	D	Date				⊖ Given ⊖ Mailed) Mailed		
Staff		Staff						Staff				

Please Return Completed Form along with payment to CCAIS 720 Fair Street, Marshall, MI 49068