



MEMBERSHIP APPLICATION FORM

To: The Secretary
P.O. Box 1768
Grand Cayman KY1-1109

Dear Sir/Madam,

I desire to become a full member of the Cayman Islands Agricultural Society in compliance with Articles 4 and 5 of the Company's Memorandum and Articles of Association. I hereby agree, if elected to become a member of the Society to be bound by the by-laws of the aforesaid Memorandum and Articles of Association and the Policies of the Agricultural Society.

I agree to pay the entrance fee of CI\$2.00 plus the annual membership fee of CI\$25.00 to become a full member of the Society and further declare that I am over the age of 18 years.

FULL NAME: _____

MAILING ADDRESS: _____

STREET ADDRESS: _____

TELEPHONE: _____ (H) _____ (W) _____ (M/C)

EMAIL: _____

NAME OF EMPLOYER: _____

POSITION HELD: _____

PROFESSION/OCCUPATION/SELF-EMPLOYED: _____

Signature: _____ Date: _____

Cayman Islands Agricultural Society

Questionnaire

In an effort to improve the Society for all members, please take a few minutes to answer the following questions. The results will be relayed to members at the monthly meetings.

1. What is your reason for joining the Cayman Islands Agricultural Society?

2. What would you like to hear/do at our monthly meetings

3. Would you like: (Please tick)

- a) Field visits to other farms?
- b) Demonstrations (e.g. Equipment, maintenance, cattle, crop care?)
- c) Various Educational Workshops and Training Seminars?
- d) Correspondence with other Agricultural Societies in other countries with similar climate, terrain to share information and experience?
- e) Arranged field visits to other farms in other countries with similar climate, terrain to gained valued information and experience?
- f) Any other suggestions?

4. What are your farming interests?

- a) Cattle Farmer
- b) Crop Farmer
- c) Aqua Farmer
- d) Any Other

Sponsor Form

To: The Secretary
The Cayman Islands Agricultural Society
P.O. Box 1768
Grand Cayman KY1-1109
Telephone: 345 947 3696, Facsimile: 345 947 0267

Dear Sir/Madam,

I propose/second Mr./Miss/Mrs.: _____

Address: _____

As a member of the Cayman Islands Agricultural Society and confirm that I have known:

For _____ years.

I am satisfied from my person knowledge of the candidate that he/she is eligible for election according to the rules, policies and procedures of the Society. I am also satisfied as to the integrity of the candidate in the community.

I am a Full Member of the Society for _____/or at least six months.

Signed: _____ Date: _____