



# Piedmont Landscape Association

P.O. Box 1678  
Charlottesville, Virginia 22902  
[membership@piedmontlandscape.org](mailto:membership@piedmontlandscape.org)  
[www.piedmontlandscape.org](http://www.piedmontlandscape.org)

## Membership Application

Applicant: \_\_\_\_\_ Spouse: \_\_\_\_\_

Membership Type: **Full Member** **Associate Member**  
Check one: \_\_\_\_\_ Fee: \$25.00 \_\_\_\_\_ Fee: \$30.00

**HOME  
INFO**

Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_

**BUSINESS  
INFO**

Company: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_  
Website: \_\_\_\_\_  
Brief Job Description: \_\_\_\_\_

All the above information will appear in the next *PLA Membership Directory* unless you request otherwise. Please note that the PLA does not make the Directory available to the public.

\_\_\_\_\_ I would also like my business information to be listed on the PLA website.

\_\_\_\_\_ Please email the monthly newsletter to my \_\_\_\_\_ business \_\_\_\_\_ home \_\_\_\_\_ both (circle one).

\_\_\_\_\_ I do not have email. Please **mail** my newsletter to my \_\_\_\_\_ home \_\_\_\_\_ business address (circle one).

Name of PLA Sponsor : \_\_\_\_\_

*Upon approval of my membership, I agree to abide by the PLA Code of Ethics and I understand that breaching this Code would be grounds for removal from the membership. Check here to agree: \_\_\_\_\_*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return this application with the application fee to the address above- Attn: Membership Chair.**

Applicants are strongly encouraged to attend general meetings during this review process. Please refer to our website listed above for questions regarding our membership process.

**Please make checks payable to the PLA.**

*office use only:*

Received / (chk #):	Decision: Approved / Denied	Decision Date:
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