

Benton County Master Gardener™ Association

Associate Membership Application

Please read both pages of this application in full, fill out both pages including your signature on page 2, and return with \$10 annual dues payment. Make check payable to BCMGA.

Mail application and payment to BCMGA, 5060 SW Philomath Blvd., #197, Corvallis, OR 97333

Associate Membership in the Benton County Master Gardener Association is available to interested community members who are not Master Gardeners but wish to support and further the objectives and mission of the association.

- Participation opportunities include attending selected MG events and activities. As an Associate Member you will receive the weekly MG newsletter, be invited to BCMGA events, and be included in the annual BCMGA Directory. This membership category does not provide access to the formal Master Gardener training classes and some advanced training classes, but we hope that you will become a trained Master Gardener in the future.
- All Associate Members shall pay dues annually and must be 18 years of age or older. This membership category is not open to active, trained BCMGA members.
- Associate members are not OSU Extension volunteers or Oregon Master Gardener Association members and are not covered by OSU Extension or the Oregon Master Gardener Association insurance policies.
- Associate support members may not present themselves as trained Master Gardeners, give horticultural /gardening advice to the public, or work with children or vulnerable adults as BCMGA volunteers.

Name (as you would like it to appear the Directory):

Preferred Phone: _____ Email address: _____

Address: _____
Street City ZIP

What contact information would you like in the BCMGA Directory? Check all that apply:

____ Name ____ Phone ____ Email ____ Address

Briefly describe your gardening experience, particular interests/strengths in gardening, and goals in working with BCMGA: (use back if necessary)

Membership Secretary Signature _____ Date _____

Benton County Master Gardener™ Association

Associate Member Code of Conduct

This Code shall guide behavior of Associate Members of the Benton County Master Gardener Association (from here on known as BCMGA). The primary purpose of this Code of Conduct is to ensure the safety and well-being of all BCMGA participants and to protect the integrity and reputation of BCMGA, OSU Master Gardener Program, and OSU Extension Services.

When acting as an Associate Member of BCMGA, I will:

- Conduct myself with professionalism, dignity, courtesy, and appropriate behavior in accordance to the BCMGA Policies and Procedures and comply with instructions and guidance of MGs.
- Promote and support the activities and programs of the BCMGA
- Comply with equal opportunity, anti-harassment, and anti-discrimination laws
- Be responsible for evaluating my own physical capabilities and participate only in those activities that are suitable for me
- Use garden tools and equipment and operate machinery, vehicles, and other equipment in a responsible manner when working at any BCMGA activity

Some BCMGA activities are governed by OSU Extension and the OSU Master Gardener program and are only open to certified Master Gardeners. See the list below.

BCMGA Activities open to all (Associate Members welcome to participate)	OSU Master Gardener Activities (Associate Members may not participate)
Plant Sale (propagation, plant care, and sale)	Help Desk
Seed-to-Supper	Clinic Tables
Some Continuing Education Activities (ask committee chair)	Some Continuing Education Activities (ask committee chair)
Membership meetings and tours	MG Training
Insights Into Gardening	School Gardens
Gearing Up for Gardening	Plant Problem Scenarios
Demonstration Garden	Mentoring
Fairground Entrance Garden	
Outreach	
One day youth events	
Greens Party	

I have read and understand the Code of Conduct outlined above. I understand and agree that any action on my part that contradicts any portion of this Code is grounds for the suspension and/or termination of my associate membership with the Benton County Master Gardener Association.

Print Name _____

Signature _____ Date _____

Please keep a copy of your signed application for reference.