

Viticulture Association of the Santa Cruz Mountains - Membership Form for 2017 -

(Dues are annual and due at the beginning of the year.)

Name:	Date paid:	
Current members: I am renewing m New memberships: <i>Please fill out th</i>		() (Only fill in new information.)
Vineyard/Winery Name:		
Address:		
Phone:(Home)		(0.11)
(Home) E-mail:		
Date vineyard established:	_ Do you sell your grape	es commercially (yes/no)?
Are you a home winemaker (yes/no)? Are you a commerci	al winery (yes/no)?
What varietals are you growing in the what is your average total tonnage/	•	, how much in acreage for each, and
Varietal/Acreage/Total Average Tone	_	
/		
More vineyard information: che		
Total vineyard acreage:	Elevation	Soil composition:
Ave. daily temps during growing sea	ason: Day:	Night:
All day sun/fog Irrigated/dry-farme	ed Organic?(certified?)/B	iodynamic?
Sustainable practices:		
Do you have a weather station? Yes	s No Do you track histo	orical data w/it? Yes No
Can you share your weather data el	ectronically? Yes No	
What program topics are you interes	sted in for 2017?	
All information	nrovided is confidentia	al to the VASCM

Please return with your annual membership fee of \$50 payable to:

VASCM:

P.O. Box 8092, Santa Cruz, CA 95061-8092