

420 Main Street
Walsenburg, CO



(719) 890-4424
ccgassociation@gmail.com

The Colorado Cannabis Growers Association

2016-2017 Application for Membership

Name: _____

Date: _____

Business: _____

DOB: _____

I hereby acknowledge that I am over 21 years of age. Initials _____

Address: _____

Phone: _____

Email: _____

I am interested in volunteering on the following committee(s): _____

Membership Level:	Monthly:	Annual:
_____ Individual	\$10	\$80
_____ Caregiver	\$25	\$200
_____ Business	\$50	\$400

We prefer cash donations but you may also make checks payable to:

TCCGA: Travis Nelson

420 Main St.

Walsenburg, CO 81089

TCCGA does not have 501(c)(3) status at this time.