



CFWC

Center for Forest & Wood Certification

Forest Management Group Member Application (CFWC-FM-01)

Landowner:

Forest Name:

Property County:

Mailing Address:

City:

Email:

| | | | | |
|--|--|-----------------|----------|--|
| | | | | |
| | | Acreage: | | |
| | | Property State: | | |
| | | | | |
| | | State: | ZipCode: | |
| | | | Phone: | |
| | | | Fax: | |

Current forest management activities:

Please complete the following portions to the best of your ability.

Do you have a Forest Management Plan? YES NO

Do you work with a Forester?

Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Fax: _____ Email: _____

Summarize current management activities and your goals for owning forestland:

About Group Certification Program Membership

In order to become certified through the Center for Forest and Wood Certification group certificate, please be aware that you will need to fulfill the following:

- Submit and follow a comprehensive forest management plan for the properties in this application. The plan must be reviewed and approved by CFWC staff as meeting the standards.
- Sign the FM Agreement with the Center for Forest and Wood Certification
- Submit proof of ownership or lease rights for the properties in question
- Receive a site assessment visit from a CFWC representative.
- Pay your initial annual membership fee with this application that is non-refundable when the site assessment is scheduled.

By signing this application for membership in the Center for Forest and Wood Certification Forest Management Section Group Certification, you acknowledge and understand that to be certified you must follow all requirements as detailed in the Center for Forest and Wood Certification Operations Manual. You must also agree to allow Center and Certifying Body personnel access to your land, following appropriate notification, for the purpose of monitoring compliance with the criteria of the standards.

Membership is voluntary, and you are free to end your membership at anytime for any reason, but you may not be eligible to rejoin at a later date and any membership fees may not be reimbursed.

Signature

Date

Mail to:

**Center for Forest and Wood Certification
213 T. P. Cooper Bldg.
Lexington, KY 40546-0073**