



Please complete the application. When finished, save to your desktop and email the document to seven@sds soybean.org.

SEE FOR YOURSELF APPLICATION FORM

Name: _____ Birthday: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Email: _____

Home Number: _____ Mobile Number: _____

Please describe your farming operation, including how many acres of soybeans you grow:

What organizations are you currently involved with?

Please indicate how familiar you are with the South Dakota checkoff. (choose one)

1. Very Familiar
2. Familiar
3. Not at all familiar

Please describe your impressions of the soybean checkoff.

Why are you interested in international marketing?
