

Stillwater Valley Watershed Council

2022 Cooperative Weed Control Program Landowner Sign-Up Form



Landowner Name: _____

Mailing Address: _____

Telephone: _____ Local Telephone: _____

Email address: _____

Property Physical Address: (location/subdivision/property description/ SPECIAL INSTRUCTIONS)

Approximate # of acres enrolled & infested (if known): _____

Please check the appropriate box(es) and return this completed form to the SVWC:

- Yes, I want to participate in the 2022 Cooperative Weed Control Program, **enclosed is my check for \$135** (\$35 SVWC annual membership and \$100 prepayment). I understand that any application time over the prepaid first hour will be billed along with associated chemical costs.
- Yes, I want to participate in the 2022 Cooperative Weed Control Program. My 2022 SVWC membership is paid, **enclosed is my check for the \$100 prepayment**. I understand that any application time over the prepaid first hour will be billed along with associated chemical costs.
- Yes, I want to participate in the "Backpack Sprayer Fill Program"—date will correspond with Upper Stillwater spray days. I understand the first backpack load is provided at no cost to SVWC members. **Enclosed is my \$35 annual membership.**
- Yes, please take a look at my property prior to treatment to determine the level and type of noxious weed infestation that exists (if any).
- Yes, I want to join the Stillwater Valley Watershed Council, **enclosed is my \$35 annual membership.**
- I do not wish to participate in the 2022 CWCP but in so doing, recognize that I am required to comply with existing Montana Local County Weed Act (7-22-2116) which states that it is unlawful for any person to permit noxious weeds to propagate or go to seed on the person's land.

Signature _____

Date _____

Please indicate your contact information and property location even if you do not wish to participate in the program. This will let us know if we have made contact with all landowners.

Return to:

Stillwater Valley Watershed Council
PO Box 112
Absarokee, MT 59001