



**INTERNATIONAL WATER INSTITUTE  
Stewardship Program**

**Agricultural Producer Participation  
Request Form**

**Name (Print)** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Telephone** \_\_\_\_\_

**Email** \_\_\_\_\_

By submitting this form you confirm your interest in participating in the International Water Institute, Stewardship Program. You acknowledge participation is completely voluntary, to agree to participate in good faith, and to provide on-farm operational and precision agriculture data subject to the confidentiality agreement.

Please fill out the form and either email it to [charles@iwinst.org](mailto:charles@iwinst.org) or mail it to 1120 28<sup>th</sup> Avenue North Suite B. Fargo, ND 58102

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_