



American Gelbvieh Junior Association Member Application Form

Updated September 2016

American Gelbvieh Junior Association
350 Interlocken Blvd., Suite 200
Broomfield, CO 80021
303-465-2333 | 303-465-2339 (fax)
www.gelbvieh.org

FOR OFFICE USE ONLY			
Received: _____	Check #: _____	Amount: _____	
Verified: _____	Date: _____		
Membership Number: _____	Herd Prefix: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Work Order: _____			

Please complete the form below to submit application for membership in the American Gelbvieh Junior Association.
If you have any questions, please do not hesitate to contact the American Gelbvieh Association Staff.

For federal income purposes, membership dues and contributions to the American Gelbvieh Association are deductible as business expenses, not as charitable contributions.

Dues and herd assessments make up your active membership and both must be paid annually to keep your membership current.

This membership is available for youth 21 years of age and younger as of January 1 of the current year. First year membership fee is \$30. Subsequently, annual dues are \$20.

Payment for these dues may be made with cash, check or credit card. Please mark which method of payment you prefer:

I have enclosed a check I have enclosed cash Please call me to obtain credit card information

The undersigned hereby applies for membership in the AMERICAN GELBVIEH JUNIOR ASSOCIATION, a non-profit corporation, with all rights and privileges and subject to the obligations thereof, as more fully set forth in the bylaws and rules and regulations of the association. Applicant further certifies that he/she agrees to be governed by the bylaws and rules and regulations. In consideration of the agreement to issue such membership, the membership fee above is paid herewith.

APPLICANT NAME (please print)

Must use given name, not a ranch name. Only one junior per membership

Birthdate: ____/____/____

SIGNATURE of applicant

Street or Rural Address

City/Town

State

Zip

PHONE NUMBERS

Please list cell, home, and/or office number(s) and check the phone number of where you are most likely to be reached first:

Cell Phone () _____

Home Phone () _____ Fax () _____

Office Phone () _____ Fax () _____

Email Address: _____

NOTE

If you have had registration papers with a number next to your name, please list:

NUMBER: _____

PLEASE COMPLETE BOTH PAGES OF THIS FORM!

AGJA MEMBERSHIP APPLICATION FORM

If you desire ALL certificates, summaries, applications, correspondence, and billing to be mailed to an address that differs from that appearing on the front of this application, please specify:

Address	City/Town	State	Zip
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Each breeder must have an individual herd prefix, consisting of three or four letters, the herd prefix may not contain numbers or symbols. Please specify choices below, in order of preference. AGA assigns the first available choice. For a three-letter prefix, leave the final space blank. If all choices are already assigned or if spaces are blank, AGA will assign a herd prefix to your membership.

CHOICE #1 ____/____/____/____

CHOICE #4 ____/____/____/____

CHOICE #2 ____/____/____/____

CHOICE #5 ____/____/____/____

CHOICE #3 ____/____/____/____

CHOICE #6 ____/____/____/____

Please fill out the following so that we may have it on file for Gelbvieh and Balancer® promotional records:
(optional)

Hometown newspaper: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Website: _____

Please return completed form to the American Gelbvieh Association

Mail: 350 Interlocken, Suite 200, Broomfield, CO 80021

Email: info@gelbvieh.org

Fax: 303-465-2339

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Payment of \$30.00 from the applicant above is acknowledged on the _____ day of _____, 20____

Approved for Executive Committee