

APPLICATION FOR MEMBERSHIP



BREED ASSOCIATION: **Canadian Meat Goat Association**

Canadian Livestock Records Corporation
2417 Holly Lane, Ottawa, Canada K1V 0M7

Telephone(613)731-7110 Fax (613)731-0704 E-Mail: clrc@clrc.ca Website: www.clrc.ca

NAME _____ Id. No., if known _____

If for a partnership, company or incorporated organization, give correct name thereof.

ADDRESS _____ Province _____ Postal Code _____

Telephone (____) _____ Fax (____) _____

E-Mail _____ Website _____

I, or we do hereby apply for membership and do hereby agree to conform to the Constitution and By-Laws of the said organization and pay a membership fee of \$ _____. (Please refer to the fee schedule).

TYPE OF MEMBERSHIP _____

PLEASE INDICATE BIRTH DATE _____ (Junior Member Only)
Day Month Year

X

Signature of Applicant or Person authorized to sign.

X

Signature of Person authorized to vote.

Date _____

MEMBERSHIP IS FOR THE CALENDAR YEAR AND IS DUE JANUARY 1ST EACH YEAR.

APPLICATION FOR TATTOO COMBINATION (for tattoo breeds only)

I/We hereby apply for the tattoo combination listed below, if available.
Fee: See Current Schedule.

FIRST CHOICE: _____

SECOND CHOICE: _____

THIRD CHOICE: _____

APPLICATION FOR HERD NAME OR PREFIX

(This section to be used for registration of a name which you will use as a herd name for naming animals.)

I/We hereby apply for the herd name listed below, if available.
Fee: See Current Schedule.

OPTIONAL

REQUIRED

FIRST CHOICE: _____

SECOND CHOICE: _____

THIRD CHOICE: _____