

# Wisconsin Angus Association Membership Form - Annual Dues \$40

Name \_\_\_\_\_ Farm Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Zip \_\_\_\_\_

Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

Email 1 \_\_\_\_\_ Email 2 \_\_\_\_\_

Website (if applicable) \_\_\_\_\_

Annual Production Sale (Y or N) \_\_\_\_\_

Private Treaty Available (Y or N) \_\_\_\_\_

Direct Meat/Beef Sales (Y or N) \_\_\_\_\_

Make checks payable to the **Wisconsin Angus Association**.

Mail to:

**Wisconsin Angus Association**

**7620 E County Road X**

**Clinton, WI 53525**

