

SD JUNIOR RED ANGUS MEMBER APPLICATION

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DATE OF BIRTH _____

PHONE NUMBER _____ EMAIL ADDRESS _____

PARENTS NAMES _____

PARENTS NUMBERS AND EMAIL _____

WOULD YOUR PARENT(S) BE INTERESTED IN BEING JUNIOR LEADERS

YES / NO

OFFICE USE ONLY

DUES PAID \$ _____ CASH OR CHECK # _____

ENTRY FEE PAID \$ _____ CASH OR CHECK # _____

