



# Whitebred Shorthorn

## MEMBERSHIP APPLICATION FORM

I wish to apply for membership of the Whitebred Shorthorn Association Ltd

Name.....

Address.....

.....

.....

Postcode.....Telephone.....

Email (if applicable) .....

I would like to use .....as the prefix for my herd

(acceptance of a prefix will be confirmed by the Association)

List of Registered Animals in your Ownership (if applicable)


Signed..... Date.....

Please include the correct payment of £20.00 for your first year. All future payments should be made by Bankers Order or BACS on or around 1<sup>st</sup> January each year. Contact the Office for a Bankers Order.

Cheques made payable to the Whitebred Shorthorn Association Ltd.

Please send to:  
The Secretary's Office