



# MEMBERSHIP FORM

Membership Name: \_\_\_\_\_

Name of Primary Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Number: Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## **Membership Options:**

\_\_\_\_\_ **Annual Member** \$90.00 + tax (Quebec members add \$10.00)

\_\_\_\_\_ **New Member** (10 free transfers within 3 years) \$45.00 + tax (Quebec members add \$10.00)

\_\_\_\_\_ **Supporter Member** (receives newsletter) \$45.00 + tax

\_\_\_\_\_ **Junior Member** (up to 18 years of age) \$25.00 + tax

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## **Prefix Registration:**

Prefix must be previously unused by the Canadian Brown Swiss & Braunvieh Association.

First Choice: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Third Choice: \_\_\_\_\_

## **Tattoo Letters Registration:**

Must be a 3 or 4 letter combination previously unused by the Canadian Brown Swiss & Braunvieh Association. Tattoo is an approved secondary identification method but not required for registration.

First Choice: \_\_\_\_\_ Second Choice: \_\_\_\_\_ Third Choice: \_\_\_\_\_

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Please return this form to:

**Canadian Brown Swiss and Braunvieh Association - Registry**

Box 610, Brantford, ON N3T 5R4

Fax: (519) 756-3502

Tel: 1-855-756-8300

Signature: \_\_\_\_\_