



Youth Membership

Annual Membership Dues \$25
(January – December)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-mail: _____

Age on 1/1/2020: _____

Signature

Date

Amount Paid \$ _____

chk/cash

Date Paid _____

**Mail to: CTYDA
PO Box 607
Thorndale, TX 76577**



Breeder Sponsorship

Annual Membership Dues \$50
(January – December)

Name: _____

Ranch Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-mail: _____

Website: _____

I certify that I desire to become a member of the Chisholm Trail Dorper Association. I agree to honorably promote the Dorper sheep breed, support and obey the Chisholm Trail Dorper Association's Articles of Incorporation and Bylaws and the Breeders' Guidelines.

Signature

Date

Amount Paid \$ _____

chk/cash

Date Paid _____

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PO Box 607
Thorndale, TX 76577