

Membership Application

First and Last Name:			Date:		
Ranch/Business Name:					
Mailing Address:					
City:	State: Zip: County:				
Contact Phone:	Email	l:			
I would like to receive r	notices via: Email: _	Mail: _			
How did you find out al	oout MVC:				
Areas of Interest in MVC (Please check all that apply)					
Beef/Ag in the Classroom Education: Ag Venture Days: Fundraisers: Parade Group: Scholarships: Social Media Support/Outreach: Other Areas of Interest:					
Membership (include	es membership in th	e California	Cattlewomen's A	Association)	
Regular Member (\$10 local/\$20 CCW)				\$30/year	
Junior Member (under 18 years of age) (\$5 local/\$20 CCW)			\$25/year		
Associate Member (\$10 out-of-county members, \$20 in CCW res. co.)				\$10/year	
Membership Year Dues Begin October 1st of Each Year					
Please mail application	and total dues to:	Mid Valle	ey Cowbelles		
		c/o Helga	a Zuber		
		15859 Li	me Kiln Road		
		Sonora, (CA 95370		
Questions: Helga Zuber (209) 581-1798		helga285	helga2853@gmail.com		