

MEMBERSHIP FORM

NEW YORK BEEF PRODUCERS' ASSOCIATION



FARM/BUSINESS INFORMATION

Farm or Business Name: _____

Date: _____

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Membership Type :

 Renewal New Member NCBA SPONSOR/ PARTNER 1ST TIME MEMBERSHIP GIFT

Cattle Owned: 0-15 16-30 31-45 46 - 60 61-75 76 +

Referred By: _____

MAILING INFORMATION

Name: _____

County: _____

Region #: _____

Phone: _____

Full Address: _____

Email: _____

Website: _____

MEMBERSHIP INFORMATION

Adult/Farm Membership \$50.00 x

Total Adult Dues: \$ _____

NCBA Dues: 0-100 head (\$180)

101-250 Head (\$360)

251-500 Head (\$540)

NYBPA Voluntary Contributions

Adult Education Fund \$ _____

Scholarship Fund \$ _____

Youth Education & Development Fund \$ _____

Junior Membership: \$10.00 X OR 3 for \$25.00

Junior Name: _____

Birthdate:
D D M M Y Y Y Y

Junior Name: _____

Birthdate:
D D M M Y Y Y Y

Junior Name: _____

Birthdate:
D D M M Y Y Y Y

Total Junior Dues: \$ _____

Total Amount Enclosed: \$ _____

\$40.00 NYBPA Sponsor Membership
Give a first time membership to a friend/customer.

Please make checks payable to: NYBPA
Mail completed form and payment to:
NYBPA
1036 Townline Rd.
Alden, NY 14004

More Information :
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www.nybpa.org