



**American Boer Goat Association
Adult w/ Junior Member Application**

(Complete this Form-Please Print and Mail to the ABGA Office)

4258 S Jackson St, San Angelo, TX 76903 Phone 325-486-2242 Fax 325-486-2637 www.abga.org



I. Adult Applicant Information (Must Be Parent or Legal Guardian of Junior Applicants on Form)

First Name	Last Name	Home Phone	Cell Phone
Address		City	State Zip/Zip + 4 County Of Residence
Office Correspondence Email Address		Are you a prior member of ABGA? (Mark Box) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	ABGA account number (List account number if known)

Junior Applicant Information

Junior # 1 First Name	Last Name	Cell Phone	*REQUIRED* Date of Birth
Address		City	State Zip/Zip + 4 County Of Residence
Office Correspondence Email Address		Are you a prior member of JABGA? (Mark Box) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	JABGA account number(List account number if known)
Junior # 2 First Name	Last Name	Cell Phone	*REQUIRED* Date of Birth
Address		City	State Zip/Zip + 4 County Of Residence
Office Correspondence Email Address		Are you a prior member of JABGA? (Mark Box) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	JABGA account number(List account number if known)

II. Herd Prefix (The prefix is 1 to 5 numbers or letters *no special characters or spaces are allowed*)

Members are required to have a unique herd prefix before registering an animal. You may register your herd prefix at the time you join at no charge. Family members can use the same herd prefix, if they reside in the same household.

ADULT Choice	Junior #1 Choice	Junior # 2 Choice
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III. Payment (To receive this reduced rate, this Adult/Junior Member Application must be used)

Item	Cost	Qty	Total
1 ABGA Membership & 1 JABGA Membership	\$60.00	1	\$60.00
Additional JABGA Membership(s)	\$30.00 EACH		
TOTAL			

Card Type: _____ Card No: _____ Expiration Date _____
 Security Code: _____ Name on Card: _____ Check No: _____

I agree to support and abide by the Articles of Incorporation, Bylaws, Rules and Regulations of the American Boer Goat Association and Junior American Boer Goat Association, and to advance the purposes of ABGA and JABGA. I have read and agree to follow the Code of Ethics. I have read and agree to follow the ABGA Online Terms and Conditions. I understand and agree that my membership can be removed at any time under the bylaws of ABGA. Regular members are entitled to transact business with ABGA at members' rates, the ADULT member will receive a copy of the official ABGA publication of "The Boer Goat" magazine. All members listed will have access to ABGA Premium Online. The JABGA member can vote for JABGA leadership of their choice and the ABGA member can vote for ABGA leadership of their choice. Limit one Adult w/Junior Membership Application per family. If additional JABGA memberships are needed, please complete an additional form. All forms must be submitted together.

Applicant Parent/Legal Guardian Signature (ABGA Member Applicant)

Applicant Signature (JABGA Member # 2 Applicant)

Applicant Signature (JABGA Member # 1 Applicant)

Date