



# FSFF Membership Application 2024

Ranch/Farm Name \_\_\_\_\_

Owner First & Last Name \_\_\_\_\_

Owner Address \_\_\_\_\_

\_\_\_\_\_

Owner Primary Phone Number	Owner Cell Phone Number
_____	_____

Owner Email \_\_\_\_\_

Manager Name/Spouse \_\_\_\_\_

Manager/Spouse Phone Number \_\_\_\_\_

Website \_\_\_\_\_

ASA Number \_\_\_\_\_

CSA Number \_\_\_\_\_

Interested in joining committee?

☐ Yes ☐ No

Check included?

☐ Yes ☐ No ☐ Paid via PayPal

Annual Dues Description

- ☐ Renewal \$100 USF
- ☐ USA Breeders \$100 USF
- ☐ Canadian/International Breeders \$100 USF

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_, 20\_\_\_\_

\*\*\*Mail applications to: FSFF PO BOX 748, CHARLESTON, AR 72933\*\*\*