

## IJHA MEMBERSHIP APPLICATION

Member Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent(s) Name: \_\_\_\_\_

*If at all possible, please include an email address. The IJHA sends out newsletters and info to our members by email through out the year. Preview Show information also goes out by email. It is the fastest and most economical way for us to communicate!*

### **RETURN THIS FORM WITH \$10 ANNUAL DUES TO**

**TARYN ADCOCK  
IJHA SECRETARY  
2347 E 1300 N  
ASSUMPTION, IL 62510**

*For questions or further info contact Taryn at: 217-820-8249 or [trose@adcockshowcattle.com](mailto:trose@adcockshowcattle.com)*