

Stark County Cattlemen's Association Membership Form

Name _____

Farm Name _____

Address _____

City _____ Zip _____

Phone _____

Type of Operation _____

Number of Head _____

Please Check One

Member _____

Associate Member _____

Or Junior (under 18) _____

Interests: (please circle those that apply)

Marketing, Nutrition, Grazing, Youth Programs, Legislation/Legislative Contacts, Reproduction, AI,

Other _____.

Please Return to:

Stark County Cattlemen's Association

C/O Becky Vincent

9007 Hillchurch St. S.E.

East Canton, Ohio 44730
