

Virginia Junior Simmental Association

You are only a Junior up to your 22nd birthday as of January 1st.

Name: _____

Address: _____

City/Town: _____ State: _____ ZIP: _____

Primary Phone: _____ Cell Phone: _____

Email: _____

Date of Birth _____

Membership Fees: First year: \$10.00

 Renewal: \$5.00

The undersigned applicant expressly agrees that the Board of Trustees has and shall forever retain the exclusive and sole right to discontinue any members's membership whenever, in the sole and unlimited discretion of the said Board of Trustees, any member shall be found to have failed to comply with any of the Association's Rules and Bylaws, Regulations, or Constitution. The above named individual agrees to abide by the Rules and Bylaws, Regulations or Constitution of the Virginia Simmental Association as amended from time to time, as interpreted and enforced by the Board of Trustees of such committees as the Board of Trustees may designate. Applicant further binds himself to keep and maintain complete within-herd performance and breeding records.

Print name of Individual

Signature of Individual

Printed name of Parent

Signature of Parent

Parent signature required if member is under 18 years of age.

Please return application to:

Farrell Jones
1903 Red Stone Rd
Chilhowie, VA 24319