



# WISCONSIN BIRD & GAME BREEDERS ASSOCIATION, INC. MEMBERSHIP APPLICATION



The Wisconsin Bird & Game Breeders Association, Inc. is for anyone who raises, or is simply interested in any kind of bird, and/or exotic or game animal.

We: 1) work to improve regulations regarding game farms; 2) sponsor a "swap" the second Saturday in March and a one day combined "Show and Swap" the last Saturday in October; 3) publish a newsletter, "The Bird and Game Pen" (6/yr), containing information, classified ads, and dates of sales, swaps, and events; 4) publish a directory listing members/stock every three years.

Any person may become a WBGBA Member by sending a check (payable to WBGBA) for dues along with this form to 4075 Little River Rd, Lena WI 54139. "Family" includes all persons living at the same address.

Since ALL MEMBERS EXPIRE DECEMBER 31 of paid year, and the minimum dues are \$15, new members joining between 1 April and 30 Sep may 1) pay full year dues for that part of the year or, 2) pay prorated dues along with dues for the following years. See charts below.

New Members Only No Renewals	1 Jan-31 Dec	1 April-31 Dec	1 June-31 Dec	1 Aug-31 Dec	1 Oct - 31 Dec
New Member Single	\$15.00	\$24.00	\$21.00	\$18.00	\$15.00
New Member Family	\$20.00	\$29.00	\$26.00	\$23.00	\$20.00

	One Year	Two Years	Three Years
Renewal-Single	\$15.00	\$28.00	\$41.00
Renewal - Family	\$20.00	\$38.00	\$56.00

Please PRINT clearly:

- I was a member last year and wish to renew. At the bottom of this page, you need only to list any changes from last year on items below.
- My previous membership has lapsed and I wish to renew.
- I wish to become a new member (single).
- I wish to become a new member (family). List other family members below (only one newsletter per address).

First Name \_\_\_\_\_  
 Last Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ +4 \_\_\_\_\_  
 County \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 E-Mail \_\_\_\_\_  
 Business or Farm Name (if any) \_\_\_\_\_  
 \$ \_\_\_\_\_ for \_\_\_\_\_ person(s)  
 for \_\_\_\_\_ years(s)

**Make check payable to WBGBA and  
 mail to WBGBA Membership,  
 4075 Little River Road  
 Lena, WI 54139**

For WBGBA use only  
 Do not write in this space.  
 re \_\_\_\_\_  
 am \_\_\_\_\_ i \_\_\_\_\_  
 cd \_\_\_\_\_  
 dy \_\_\_\_\_  
 # \_\_\_\_\_ cm \_\_\_\_\_

← **Please Circle Dues Choice**