

APPLICATION FOR MEMBERSHIP



BREED ASSOCIATION: **Canadian Meat Goat Association**

**Canadian Livestock Records Corporation**  
2417 Holly Lane, Ottawa, Canada K1V 0M7

Telephone(613)731-7110 Fax (613)731-0704 E-Mail: clrc@clrc.ca Website: www.clrc.ca

NAME \_\_\_\_\_ Id. No., if known \_\_\_\_\_

If for a partnership, company or incorporated organization, give correct name thereof.

ADDRESS \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

E-Mail \_\_\_\_\_ Website \_\_\_\_\_

I, or we do hereby apply for membership and do hereby agree to conform to the Constitution and By-Laws of the said organization and pay a membership fee of \$ \_\_\_\_\_. (Please refer to the fee schedule).

TYPE OF MEMBERSHIP \_\_\_\_\_

PLEASE INDICATE BIRTH DATE \_\_\_\_\_ (Junior Member Only)  
Day Month Year

X \_\_\_\_\_ X \_\_\_\_\_  
Signature of Applicant or Person authorized to sign. Signature of Person authorized to vote.

Date \_\_\_\_\_

**MEMBERSHIP IS FOR THE CALENDAR YEAR AND IS DUE JANUARY 1ST EACH YEAR.**

APPLICATION FOR TATTOO COMBINATION (for tattoo breeds only)

I/We hereby apply for the tattoo combination listed below, if available.  
Fee: See Current Schedule.

FIRST CHOICE: \_\_\_\_\_

SECOND CHOICE: \_\_\_\_\_

THIRD CHOICE: \_\_\_\_\_

APPLICATION FOR HERD NAME OR PREFIX

(This section to be used for registration of a name which you will use as a herd name for naming animals.)

I/We hereby apply for the herd name listed below, if available.  
Fee: See Current Schedule.

OPTIONAL

REQUIRED

FIRST CHOICE: \_\_\_\_\_

SECOND CHOICE: \_\_\_\_\_

THIRD CHOICE: \_\_\_\_\_