

MEMBERSHIP APPLICATION

OHIO STATE NEW ZEALAND RABBIT BREEDERS ASSOCIATION



Dues:

Single - \$8 yearly
Married Couple - \$10 yearly
Family - \$12 yearly

Newsletter *(check one)*

by email, no charge
 by US mail, include additional \$10 yearly

Make checks payable to: OSNZRBA

| Name | Adult/Youth | Youth Date of Birth | ARBA # |
|------|-------------|---------------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Amount Paid: _____ **Date:** _____ **Cash/Check#** _____

Contact Information:

First Name _____ **Last Name** _____

Address: _____

Phone Number: _____

Email: _____

Mail Form and Dues to: **Shannon Obringer** **Questions:** osnzbba@gmail.com or (419)733-9997
 5793 Karch Road
 Coldwater, OH 45828

Dues Receipt

First Name _____ **Last Name** _____

Amount Paid: _____ **Date:** _____

Club Secretary Signature: _____