

LMRRC Membership Application

Adult Name _____ ARBA# _____

Youth Name _____ DOB _____ ARBA# _____

Address: _____

Phone# _____ Cell# _____

E-mail Address: _____

Rabbitry Name: _____

Varieties You Raise: _____

2nd Adult Name: _____ ARBA# _____

Youth Name: _____ DOB _____ ARBA# _____

Youth Name: _____ DOB _____ ARBA# _____

Youth Name: _____ DOB _____ ARBA# _____

Youth Name: _____ DOB _____ ARBA# _____

TYPE OF MEMBERSHIP

1 YEAR YOUTH \$5.00

1 YEAR ADULT \$10.00

1 YEAR FAMILY \$15.00

(HUSBAND AND WIFE AND
THIER CHILDREN)

1 YEAR TEAM \$20.00

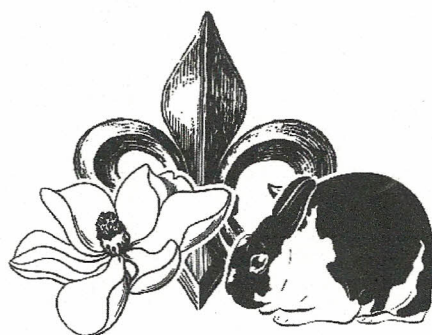
(NON FAMILY MEMBERS
SHOWING TOGETHER)

3 YEAR YOUTH \$10.00

3 YEAR ADULT \$25.00

3 YEAR FAMILY \$35.00

3 YEAR TEAM \$50.00



LMRRC

SEND PAYMENTS VIA PAYPAL TO LMRRC@YAHOO.COM WITH AN EMAIL OF YOUR MEMBERSHIP FORM AND INFO OR MAKE CHECK PAYABLE TO ALICE LEJEUNE LMRRC. SEND FORM AND PAYMENT, IF BY CHECK TO;

ALICE LEJEUNE

611 SOUTH JOSEPH ST

WELSH, LA 70591