



BLUEFACED LEICESTER BREEDERS ASSOCIATION

(B.F.L.B.A.)

WWW.BLUEFACEDBREEDERS.COM

MEMBERSHIP APPLICATION

Date _____

Name _____

Farm Name _____

Flock Prefix _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

E-mail _____ Website _____

Number of white BFL ewes _____ Colored BFL ewes _____

VSFCP # _____ Federal ID # _____ OPP Society member? _____

Services/Products Available: Breeding stock _____ Fleeces _____ Other _____

Note: Information provided is used to update our membership list which is widely distributed and also posted on the BFLBA website.

If you wish to be excluded from either list, please check box(es) below.

_____ Please omit my name from the website list.

_____ Please omit my name from the mailed list.

Membership Level: **ACTIVE** _____ \$15.00 (voting rights, newsletter, web listing)

ASSOCIATE _____ \$10.00 (newsletter, web listing)

JUNIOR _____ \$10.00 (newsletter, web listing)

Return completed application and check (payable to: **Brenda Lelli - BFLBA**)

To: Brenda Lelli, membership secretary

17496 88th Ave.

Coopersville, MI 49404

Ph#: 616-837-1872 / e-mail: BFLBA@aol.com

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Retain this portion for your records

BLUEFACED LEICESTER BREEDERS ASSOCIATION

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Annual Membership Dues

Date paid on: _____ Amount paid: _____ Check number _____

