

AMERICAN BOER GOAT ASSOCIATION™

4258 South Jackson St. San Angelo, TX 76903 325-486-2242 · mail@abga.org

ABGA Membership Renewal Form

Current Information			Change To	
Member #:			0	
Name:			Name:	
Farm Name:			Farm Name:	
Address:			Address:	
Home Phone:			Home Phone:	
Mobile Phone:			Mobile Phone:	
Email:			Email:	
 I agree to receive temporary certificates, requests for information (RFI), statements, and other ABGA office related communication via email. (Must check one) Would you like to receive a Boer Goat Magazine? (Must check one) If yes: One per household Other 				
ABGA Membership Renewal Fees		Contributions		
Qty	Dues Amount	Amount	Fund	Amount
	\$60/ year Adult	\$	Junior Scholarship	\$
	\$30/ year Junior	\$	Boer Goat Research	\$
			ABGA National Show Fund	\$
	Subtotal:	\$	Total:	\$
*ABGA dues are a tax-deductible business expense for most producers. However, charitable contributions or gifts to ABGA are not deductible for federal income tax purposes. **All JABGA Memberships <u>must</u> have an active ABGA Adult Membership listed as an agent before renewal can be processed.				
JABGA Member Name:			Member #:	
JABGA Member Name:			Member #:	
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IARCA Member Name			Mambar #	
	Agent Name:		Member #:	
	Agent Signature:		Date:	
By submitting this form, I agree to support and abide by the Articles of Incorporation, Bylaws, Rules and Regulations of the American Boer Goat Association and Junior American Boer Goat Association, and to advance the purposes of ABGA and JABGA. I have read and agree to follow the Code of Ethics. I have read and agree to follow the ABGA Online Terms and Conditions. I understand and agree that my membership can be removed at any time under the bylaws of ABGA. **Regular members are entitled to transact business with ABGA at members' rates, the ADULT member will receive a copy of the official ABGA publication of "The Boer Goat" magazine. All members listed will have access to ABGA Online. The JABGA member can vote for JABGA leadership of their choice and the ABGA member can vote for ABGA leadership of their choice. Membership runs per calendar year. Payment: Visa M/C Disc AmEx Check (#) Money Order Cash Cash Check Membership of their choice.				
Card Nu	mber	Exp. Date CVV	Name Printed on Card Card H	older Signature

SUBMIT COMPLETED FORM TO: <u>mail@abga.org</u> or, 4258 S. Jackson St. San Angelo, TX 76903