



American Lineback Cattle Registry

2024 Membership Application

_____ New Member _____ Membership Renewal (Member No. _____)

Name(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: Home: _____ Cell: _____ Fax: _____

Email: _____

_____ Yes, I would like to receive the "Between the Lines" Newsletter via email.

Membership Type (check one):

_____ A) Junior Membership (under 21) – a one-time fee of \$20
 ***MUST** include date of Birth: _____

_____ B) Individual (with spouse) -\$20

_____ C) Family/Farm -\$30
 Name(s) & Birth Date(s) of children under 21:

Name: _____ Birth Date: _____

Name: _____ Birth Date: _____

Name: _____ Birth Date: _____

Name: _____ Birth Date: _____

_____ D) Lifetime Membership- \$300

_____ I would like to donate to the Junior Show Fund.

Please list sponsorship as: _____

Membership Total: \$ _____

Donation Amount: \$ _____

Total Amount Enclosed: \$ _____

Please Make Checks Payable to: ALCR or American Lineback Cattle Registry

Mail form & payment to: American Lineback Cattle Registry
 P.O. Box 268
 Nottingham, PA 19362

**** Memberships expire December 31st of each year**

**** Memberships must be paid 30 days prior to annual National meeting in order to have voting privileges.**