

***NORTH CAROLINA ANGUS AUXILIARY***  
***MEMBERSHIP FORM***

***RETURN TO Martha Holshouser, 285 Spring Lake Ln., Gold Hill, NC 28071***

***NAME*** \_\_\_\_\_ ***COUNTY RESIDENCE*** \_\_\_\_\_

***ADDRESS*** \_\_\_\_\_

***STATE*** \_\_\_\_\_ ***ZIP CODE*** \_\_\_\_\_

***TELEPHONE HOME*** (\_\_\_\_\_) \_\_\_\_\_ ***WORK*** (\_\_\_\_\_) \_\_\_\_\_

***EMAIL*** \_\_\_\_\_

***DUES \$25 STATE AND NATIONAL***

***MEMBERSHIP YEAR: JANUARY - DECEMBER***

***MAKE CHECKS PAYABLE TO NORTH CAROLINA ANGUS AUXILIARY***