



Membership Application

I hereby make application for membership in the Michigan Hereford Association (MHA). Upon becoming a member, I agree to be governed by the constitution and By-Laws of the MHA and to abide by the rules of the American Hereford Association. Dues for one year are \$20, payable to MHA.

Date: _____

Member Name: _____

Farm Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone Number: _____

Email: _____

Farm Website: _____

Please Mail or Email to: MHA Secretary/Treasurer
3204 132nd Ave
Hopkins, MI 49328
michiganhereford@gmail.com