



National Jersey Woolly Rabbit Club
NEW MEMBERSHIP APPLICATION

Name ARBA #

For Family membership, list additional names of all family members who currently live at the same address:

Name ARBA # **Youth DOB required (month/day/year)

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Any additional please list on back

Address: _____

Number and Street

City

State

Zip Code

** EMAIL: _____ Phone # _____

Adult New Membership 1 year \$15.91 or 3 years \$37.08 \$ _____

Youth New Membership 1year \$12.72(under the age of 19) or \$ _____

3 years (if 16 years or younger at renewal date) \$27.81

Family New Membership 1 year \$26.52 or 3 years \$63.65 \$ _____

(2 adults and any children under the age of 19 legally residing at the same address

or under the age of 16 for a 3 year membership. TOTAL \$ _____

In paying by check you can deduct 3% fee for Paypal Send Check or money order to NJWRC along with the application to:

NJWRC Secretary % Gail More

5255 Eberly Road Atwater, OH 44201

EMAIL: Njwrcsecretary@gmail.com

PayPal: njwrclubtreasurer@gmail.com

NOTE: When paying by PAYPAL please put in the notes section: **YOUR NAME** and a list of **ALL MEMBERS** and how you are sending in your application. You still need to submit the form if paying by paypal. It can be submitted by mail or email to the address listed above.

** Required

