

**CANADIAN TEXAS LONGHORN ASSOCIATION
2020 MEMBERSHIP FORM**

NAME: _____
RANCH NAME: _____
BOX # OR STREET ADDRESS _____
TOWN/CITY _____
PROVINCE _____
POSTAL CODE _____
PHONE _____
CELL PHONE _____
EMAIL _____
WEBSITE _____
TLBAA# _____
ITLA# _____

_____ \$50 ACTIVE MEMBER (VOTING)

_____ \$25 NON-VOTING

_____ (initial) I agree to let CTLA print my name and or farm name, contact information and pictures in CTLA related publications, and also forward that information to potential clients.

**Please make cheques payable to:
CTLA OR CANADIAN TEXAS LONGHORN ASSOCIATION**

**Return to:
CTLA
c/o Kristine Fossum
Box 598
Consort, Alberta
T0C 1B0**

For more information call 403-577-2364 or cell 403-575-0114 (cell)

Email: office@ctlalonghorns.com

Web: www.ctlalonghorns.com

