

# Alabama Simmental Association Registration Form

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Farm Name: \_\_\_\_\_ Date: \_\_\_\_\_

Member(s) Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone# \_\_\_\_\_ Farm website: \_\_\_\_\_

Email: \_\_\_\_\_ **\*\*\*\*Please include email\*\*\*\***

New Member \_\_\_\_\_ Renewal: \_\_\_\_\_ Junior \_\_\_\_\_

Yearly Dues: \$50

Please make check payable to **Alabama Simmental Association**

Mail check and registration form to:

ALSA c/o

Charles Greene

12738 Northside Rd

Northport, AL 35475

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