

Join Multiple State Associations ...

Fill Out One Form! Make One Payment!

Support 5 or more states and be in the drawing for a Grand Prize

1 Straw of AC/DC!!

(Donated by Prime Acres Whitetails. Drawing will be April 23, 2023)

Illinois ILDFA:	North Dahota Deer Ranchers FO	ILLINOIS	Menutanet V	((, ,)))		
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Company Name Assoc. Member \$50	(Illinois) ILDFA:	Assoc. Memb	er \$25 Ac	tive Member \$50	Lifetime Member	r \$500
Rentucky KALA:	(Indiana) IDEFA:	Assoc. Memb	er \$50 Ac	tive Member \$50	Full Member W/S	pouse \$75
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Oklahoma) WOO: Pennsylvania) PDFA: Assoc. Member \$50 Assoc. Member \$75 Active Member \$100 Lifetime Member \$1000 Lifetime Member \$1000 Credit Card Oracli: (\$685. to support all 15 states as an associate member) Check: # Credit Card PLEASE NOTE: If you are a resident of any of these states and required to be an active member, please select the correct level above. If you are not sure of your membership status with a state and you sign up, your payment will cover you for the next year. "These states allow anyone that lives in their state and not raising deer but have interest to supporting the industry to be at the Associate Membership Level. This level is a non-voting level. Name: Spouse or Partner: Farm Name/Company: Membership Address: City: State: Zip: County Main preferred listing phone: Alternate listing phone: Email: WebSite:						
Pennsylvania) PDFA: Assoc. Member \$75				,	Active Member W	//Spouse \$200
South Dakota) SDEBA: Assoc. Member \$25 Animal Owners \$50 Fotal: (\$685. to support all 15 states as an associate member) Check: # Credit Card PLEASE NOTE: If you are a resident of any of these states and required to be an active member, please select the correct level above. If you are not sure of your membership status with a state and you sign up, your payment will cover you for the next year. *** These states allow anyone that lives in their state and not raising deer but have interest to supporting the industry to be at the Associate Membership Level. This level is a non-voting level. Name: Spouse or Partner: Farm Name/Company: State: Zip: County Membership Address: City: State: Zip: County Alternate listing phone: Hernali: WebSite:	(<i>Pennsylvania</i>) PDFA:	<u> </u>				•
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Products I Offer: MeatVelvet Antler Industry Supplies Feed Nutritional SupplementsVaccineGraphic Design & or Web Design Other Products or Services:	Name: Farm Name/Company: Membership Address: Main preferred listing phone: Fax:	resident of any of these sta ot sure of your membership es allow anyone that lives in their	tes and required to be an a status with a state and you state and not raising deer but ha	ctive member, please se sign up, your payment we interest to supporting theSpouse or PaStatAlternate listing phoneIndustry Supplier	elect the correct level above. will cover you for the next yea e industry to be at the Associate Me artner:	ar. Imbership Level. This level is a non-voting level. County Il DeerElkMule Deer
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I hereby make application for membership to these associations, agreeing to conform to the Code of Ethics and Bylaws governing the associations.	Name: Farm Name/Company: Membership Address: Main preferred listing phone: Fax: Check which apply:Own Products I Offer: Meat Other Products or Services:	resident of any of these state of sure of your membership es allow anyone that lives in their established by the surface of th	tes and required to be an a status with a state and you state and not raising deer but hat a state and not raising deer bu	ctive member, please se sign up, your payment we interest to supporting theSpouse or PaStatAlternate listing phoneIndustry Supplier (elect the correct level above. will cover you for the next yea e industry to be at the Associate Me artner: te: Zip: WebSite: Species Raised: Whitetai Other Species Raised: ements Vaccine elect the correct level above. WebSite: WebSite: Species Raised: Whitetai	ar. Imbership Level. This level is a non-voting level. County Il DeerElkMule Deer Graphic Design & or Web Design

THIS FORM IS AVAILABLE TO FILL OUT ONLINE: deersites.com

IF MAILING, SEND TO: KATHY GIESEN • 305 E. 350 N., IVINS, UT 84738

Office Use Only							
Form#	Event:	Entered Date:	Associate:				