

Sunflower Rabbit Breeders Association
2016 Membership Application

Mail to:
Suzanne Mitsch
PO Box 457
Augusta, KS 67010
(316) 734-2712

Make Checks Payable to: **Sunflower RBA**

Name	Open / Youth (circle)	ARBA Member No.	Birthday Youth Only	Non ARBA Fee	SRBA Dues	Total
	O / Y			\$ 1.00	\$ 5.00	
	O / Y			\$ 1.00	\$ 5.00	
	O / Y			\$ 1.00	\$ 4.00	
	O / Y			\$ 1.00	\$ 0.00	
	O / Y			\$ 1.00	\$ 0.00	
	O / Y			\$ 1.00	\$ 0.00	
	O / Y			\$ 1.00	\$ 0.00	
Total Amount Enclosed						

Membership year runs from Jan 1 to Dec 31

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email Address**: _____

Breed(s) Raised: _____

Committee(s) I would help with: _____

****Newsletter Delivery:**

I would prefer my newsletter delivered via: Email Regular Mail

Application Form Instructions:

Enter each name, ARBA number and youth birthdays (required for all youth members.) Dues for each family member are listed, with a maximum of \$14 per family SRBA dues. However, the \$1.00 Non-ARBA fee applies to everyone who is not a member of the ARBA, whether or not they pay SRBA dues. Please list additional members on a separate sheet.

If you have any questions, please contact Suzanne Mitsch - (316) 734-2712

Submission of this membership application acknowledges acceptance of the Constitution and By-Laws of the Sunflower Rabbit Breeders Association by all named persons.