Membership Application

Michigan Sheep Producers Association (MSPA)

Name:	County:		
Farm or Business Name:			
Address:			
City:	State:	Zipcode	
Phone ()	Email:		
\Box I do not have access to email	This is a gift membership		
Do not include my address (name wi	ll be included) in c	iny MSPA Directory	
Please indicate all items and/or service	es associated with	your operation:	
Purebred:(Breeds)	Sheep E	quipment	
□No.of sheep on farm	Stock Dogs, Guardian Animals		
Club Lambs	Veterinary Services		
Commercial:(Breeds)	_ Forage-related Service (Consulting,		
Fiber Producer	Seed sal	es, Feed sales, etc.)	
Lamb Direct to Consumer	□ Wool Pro	ocessor	
Pelt	Other		
Shearing			
Referred by:			
Membership year is from January 1-Decem the next calendar year.	ber 31. Dues receive	d after October 1 will be applied to	
Adult Membership/Family Membership:		\$40.00	
Youth Membership: (17 years of age and	under)	\$20.00	
Gift Membership opportunity	inity \$30.00		
Special rate allows <u>a MSPA member</u> to gift a member will receive all benefits provided by M			

TOTAL \$ _____ Pay online at <u>http://misheep.org</u> OR Send application and fee by check to: Pat Schloss, MSPA Treasurer, 5420 Farrell Rd, Dexter, MI