



**INDIANA BEEF
ALLIANCE LLC**

**APPLICATION FOR
MEMBERSHIP**

1. NAME/FARM _____
2. ADDRESS _____

3. TELEPHONE/FAX NUMBERS _____
4. EMAIL ADDRESS _____
5. PREMISE IDENTIFICATION NUMBERS _____
6. DESCRIBE YOUR CATTLE/FARMING ENTERPRISE (PLEASE PROVIDE THE APPROXIMATE NUMBER OF CATTLE ON YOUR FARM)

7. EXPLAIN WHY YOU ARE INTERESTED IN JOINING THE ALLIANCE

8. By applying for membership you agree to follow the rules governing all shareholders/members of the alliance. You also agree to pay the initial membership fee of \$250.00 plus any other fees assessed by the membership that may be agreed upon by a vote of the majority of the membership. Membership is voluntary. I UNDERSTAND THAT MY MEMBERSHIP WILL BE APPROVED ONLY AFTER A MAJORITY VOTE BY THE MEMBERSHIP ATTENDING THE NEXT MONTHLY MEETING.

DATE:

NAME OF APPLICANT