



Membership Application for 2020-2021

July 1, 2020 thru June 30, 2021

Name: _____ Same Information as last year
(As you want in directory)

Ranch Name or Business Name, if Applicable: _____

Cell Phone #: _____ Home #: _____

Address: _____

E-Mail: _____ Husband's Name: _____

ANNUAL DUES:

(Check only one level of membership)

<input type="checkbox"/>	Active Member (\$14 HCCW, \$26 Texas CattleWomen)	\$40	A member who attends meetings and is willing to actively serve the organization.
<input type="checkbox"/>	Supportive Member (\$50 HCCW)	\$50	A member who cannot or does not regularly attend, but wants to support HCCW.
<input type="checkbox"/>	Supportive Member + Texas CattleWomen (\$24 HCCW, \$26 TCW)	\$50	A member who cannot or does not regularly attend, but wants to support HCCW and be a member of TCW.

<input type="checkbox"/>	YES! I want a Name Tag	\$13
--------------------------	------------------------	-------------

CORPORATE SPONSORSHIP:

<input type="checkbox"/>	Corporate Sponsorship (please provide logo if applicable)	\$100	A non-voting member of HCCW. Will not receive newsletters or correspondence but will be included in the yearbook and website.
--------------------------	---	--------------	---

Mail Dues & Form to: Alice Anderson
511 Kreutzberg Road
Boerne, TX 78006
elmaxranch@gmail.com

Make Checks Payable to: HCCW

For HCCW USE: Amount Paid:\$ _____ Payment method or Check # _____