



## Membership Application

VCMHC Membership for **January 1, 2018 - December 31, 2018.**

Please complete form by checking your membership choice.

**Dues:**

- Adult \$30.00
- Couples \$35.00
- Junior (under 18) \$15.00
- Youth (18-21) \$25.00
- Family \$40.00

Make checks payable to "VCMHC"

Total enclosed: \_\_\_\_\_  
Member Name(s): \_\_\_\_\_  
Farm Name: (IF applicable) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_  
Barn (\_\_\_\_) \_\_\_\_\_  
Mobile (\_\_\_\_) \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Website: \_\_\_\_\_

Mail to: June Davis  
163 Baker Rd.  
Pink Hill, NC 28572