

MISSISSIPPI JUNIOR ANGUS ASSOCIATION
Application for Membership

Name _____

Address _____
(Route, Box or Street) (Town) (State) (Zip Code)

Date of Birth _____ Age _____ Male _____ or Female _____

Parents Name(s) _____

Home Phone - Area Code _____ Phone Number _____

Please circle the district show that you attend:

NE – Verona

SE – Hattisburg

Delta – Greenwood

NW – Batesville

SW- Jackson

****Dues are \$5.00 per year, per person, payable at State Fair.****

Dues year runs from October 1–September 30 yearly

**Please mail to: Connie Walker,
1533 Hwy 178,
Potts Camp, MS 38659**

662-333-7747 – home

662-837-5575 - cell