



Junior Membership Application

Junior Membership Benefits Include:

- Free membership
- Preferred fees for Registrations
- Learning and training
- Personal assistance
- Loyalty gift
- New Members kit
- Opportunities to socialize and meet people who share the same interest

Thanks for teaming up with Holstein Canada!

Do you need help with an application? Our Customer Service team would be happy to assist! Call us at 1-855-756-8300 or email customerservice@holstein.ca

A Junior Membership with Holstein Canada and its respective Provincial Branch extends for 12 months from the date of paperwork receipt and is automatically renewed annually until your 21st birthday.

I declare that I am 12 to 21 years of age and acknowledge that Junior Membership becomes void following the anniversary date of my 21st birthday. Please include copy of Birth Certificate with application for verification.

Name _____ Signature _____
(print name)

MEMBERSHIP NAME

Your membership name can be an individual name or farm name and cannot exceed 40 characters in length, including spaces, hyphens, and apostrophes. The membership name as printed below is what will appear on certificates of registration.

(Print your membership as individual name or farm name as you wish it to appear on Certificates of Registration)

If using a farm name, please indicate an individual name as a Care of (c/o) _____

PREFIX

The Association will designate for each member upon the Certificate of Membership a unique prefix. The prefix will be used as the first name of all calves registered by you as the breeder. A prefix is ideally one word and cannot exceed 15 characters in length, including hyphens and apostrophes. A member of a designated prefix may extend the use of their prefix to members of the immediate family or you may choose your own.

OPTION A: Prefix Sharing

Owner of prefix is to complete the information below to give you permission to use the prefix.

- I would like to share my immediate family's prefix.
- This Junior Membership will be associated to my customer account and I am therefore responsible for all Junior Membership activity fees

I _____, agree to share the following Prefix _____
(print name)

Signature _____ My relationship with this Junior member is _____

MAIL TO: HOLSTEIN CANADA, 20 CORPORATE PLACE, BOX 610, BRANTFORD, ONTARIO, CANADA N3T 5R4

OR: FAX | 519-756-3502. EMAIL | [CUSTOMERSERVICE@HOLSTEIN.CA](mailto:customerservice@holstein.ca) WEB | [WWW.HOLSTEIN.CA](http://www.holstein.ca)

OPTION B – My Own Prefix

I would like to choose my own prefix; indicate in order of your preference below:

1st Choice: _____ 2nd Choice: _____

I agree to abide by the By-laws of the Association and any amendments thereto. I agree to keep complete, accurate and consecutive records of all dates of service with positive identification of females bred and the sire used, and of all dates of calving with the tag number and sex of calf. I acknowledge the Association has the right to inspect such herd records at any time. I agree to notify the Association within 30 days of any changes in the above information.

I understand that Holstein Canada shares information as it pertains to the normal conduct of our business. Under no circumstance is information sold to third parties without consent. By providing your information, customers consent to the sharing of information in this context. Holstein Canada values its relationships with its customers and is committed to the protection of their personal information.

AUTHORIZED USERS (optional)

This section is to add authorized representatives onto your Junior Membership account. These are representatives to whom you give signing authority, and they can access your account information.

1. Junior Member's Name: _____
(print name)

Signature: _____ Date: _____

2. Authorized User's Name: _____
(print name)

Signature: _____ Date: _____

MAILING ADDRESS (if setting up own account)

To be completed if new customer account

Address: _____

City: _____ Province: _____ Postal Code: _____

Premises ID: _____

Telephone: _____ Email address: _____

FARM ADDRESS

My farm address is the same as my home address

Address: _____

City: _____ Province: _____ Postal Code: _____

Premises ID: _____

Telephone: _____ Email address: _____