



# Application for Membership



## A Holstein Canada membership connects your passion for Holsteins with your farm's bottom line!

Membership with Holstein Canada and its respective Branch extends for 12 months from the date of receipts at Holstein Canada and is automatically renewed annually.

Holstein Canada Customer Account Number (if exists): HC \_\_\_\_\_

If you do not have an account with Holstein Canada, complete Customer Information form to set up an account with your membership application.

### MEMBERSHIP TYPE

Any person who is interested in the breeding of Holstein cattle and who agrees to be bound by the provisions of these By-laws may apply for membership in the Association.

Regular Membership     Junior Membership (12 to 21 years of age) \*complete info below

\*I declare I am 12 to 21 years of age and acknowledge that Junior Membership becomes void following the membership anniversary date following my 21st birthday. ***Include copy of Birth Certificate with application.***

Date of Birth (YYYY/MM/DD): \_\_\_\_\_

Signature: \_\_\_\_\_

### MEMBERSHIP NAME

Your membership name cannot exceed 40 characters in length, including spaces, hyphens, and apostrophes.

\_\_\_\_\_  
*\*Print the membership name as you wish it to appear on Certificates of Registration*

### PREFIX

The Association will designate for each member a unique prefix; indicate your prefix choice in your order of preference below. The prefix will be used as the first name of all calves registered by you as the breeder. A prefix is ideally one word; not to exceed 15 characters in length, including hyphens and apostrophes.

First Choice: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Third Choice: \_\_\_\_\_

MEMBERSHIP PERSON(S)

To be completed by the applicant applying for the membership and any individual(s) that will be authorized representatives and have signing authority on behalf of this membership.

Account Holder 1 Full Name: (print)

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Account Holder 2 Full Name: (print)

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Account Holder 3 Full Name: (print)

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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.

**As Account Holder I authorize the above membership to be added to my customer account**

Account Holder Full Name: (print)

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Thanks for teaming up with Holstein Canada!**  
Our customer service team would be happy to answer  
any questions or provide further information.

**customerservice@holstein.ca**

Please be advised that Holstein Canada shares information as it pertains to the normal conduct of our business. Under no circumstance is information sold to 3<sup>rd</sup> 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. Accordingly, Holstein Canada adheres to the privacy principals in which are available in our official privacy policy found on [www.holstein.ca](http://www.holstein.ca)