



Wisconsin State Rabbit Breeders Association
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WSRBA Application For Membership

I hereby make application for membership in the Wisconsin State Rabbit Breeders Association, Inc. and agree to abide by its constitution and bylaws.

NEW RENEW

Adult 1 Year (\$13.00) 3 Year New (\$33.00) 3 Year Renew (\$30.00)

Youth 1 Year (\$10.00) 3 Year New (\$24.00) 3 Year Renew (\$21.00)

Household 1 Year (\$15.00) 3 Year New (\$39.00) 3 Year Renew (\$36.00)
(2 Adults)

Family 1 Year (\$21.00) 3 Year New (\$56.00) 3 Year Renew (\$53.00)
(2 Adults and Children)

Name _____

Address _____ City _____ State ____ Zip _____

Birth Date of Youth Members _____

Phone # _____ Email _____

Breeds Raised _____

Recommended by _____

I give permission for the WSRBA to use mine/and/or my youths photo for publication in the WSRBA Bulletin and/or WSRBA Website.

I DO NOT give permission for the WSRBA to use mine/and/or my Youths photo for publication in the WSRBA Bulletin and/or WSRBA Website.