APPLICATION AND MEMBERSHIP AGREEMENT

County Farm Bureau[®] and Illinois Agricultural Association[®]



Our goal is to maintain an organization through which farm people and others can think, act, and work together to strengthen agriculture's role and influence as a vital part of a strong and prosperous economy in a free America. We work to better the conditions of those engaged in agriculture, improve the grade of agricultural products, and develop a higher degree of efficiency in the production of agricultural products.

I believe in and support these goals and purposes and seek to promote them by joining this county Farm Bureau.

I hereby apply for membership in _______ County Farm Bureau and the Illinois Agricultural Association. This application is for the membership year beginning ______, 20 _____, and ending ______, 20 _____, and from year to year thereafter, so long as the membership dues are paid in advance. Such membership is subject to the bylaws of these organizations. The membership dues of \$_____* for the first membership year are paid herewith. I agree to pay membership dues in the total amount fixed in the bylaws of the county Farm Bureau and in the bylaws of the Illinois Agricultural Association for each succeeding

membership year in advance so long as this agreement remains in effect. I understand that \$3.00 of my annual membership dues is for a year's subscription to the Illinois Agricultural Association's official publication as checked: () Farm Week (designed for farm operators) or () Partners. Also, \$______of my annual membership dues is for a year's subscription to ______, the official publication of my county Farm Bureau.

I understand that this application for membership is subject to acceptance by the county Farm Bureau board and the Illinois Agricultural Association. In the event this application is not accepted, the membership dues paid herewith shall be refunded. Further, the county Farm Bureau board has the authority to classify my membership in accordance with the bylaws of the county Farm Bureau and the Illinois Agricultural Association on the basis of the personal information contained in this application.

Either party may terminate this membership agreement as of the end of any membership year by notice in writing to the other party during the last 60 days of such year.

* Membership dues are not tax deductible as charitable contributions.

Membership Number _	Tele	ephone	
Name (Please Print)	Last	First	Middle
Name Spouse/Civil Union Par	tner Last	First	Middle
$\frac{\text{Address}}{\text{House Number/RR}}$		Street	
CityState		Zip Code	
County		Township	
Email Address			
Birthdate	Applicant		Spouse/Civil Union Partner
ALIFICATIONS		, ·	
ALIFICATIONS	☐ Individual Farm Owner:	Acres in	County/State
Gross farm income \$2,500 or more per year	☐ Individual Farm Operator : _	Acres in	County/State County/State
Gross farm income \$2,500	☐ Individual Farm Operator : _ Form of Ownership or Metho	Acres in od of Operation:	County/State
Gross farm income \$2,500 or more per year Does not own or operate farm	☐ Individual Farm Operator : _ Form of Ownership or Metho	Acres in od of Operation:	County/State
Gross farm income \$2,500 or more per year Does not own or operate farm you ever been a Bureau member?	☐ Individual Farm Operator : Form of Ownership or Metho Occupation:	Acres in od of Operation: This is an i	County/State individual membership.
Gross farm income \$2,500 or more per year Does not own or operate farm you ever been a	☐ Individual Farm Operator : Form of Ownership or Metho Occupation: ☐ This is a joint membership. Signature of Applicant	Acres in od of Operation: This is an	County/State individual membership.
Gross farm income \$2,500 or more per year Does not own or operate farm you ever been a Bureau member?	☐ Individual Farm Operator : Form of Ownership or Metho Occupation: ☐ This is a joint membership. Signature of Applicant Signature of Spouse/Civil Union	Acres inAcres in	County/State individual membership.