



## ARIZONA STATE COWBELLES, INC.

### MEMBERSHIP APPLICATION

The Arizona State Cowbelles is a unified, professional organization made up of Arizona women – playing a vital role in the state's cattle community.

The purpose of the organization is to:

- Serve as the women's voice of the cattle industry.
- Enhance understanding and friendship among those engaged in, or interested in the cattle community.
- Coordinate with the Arizona Cattlemen's Association, Arizona Beef Council and any other organization, in promoting the cattle industry.

**JOIN THE ARIZONA STATE COWBELLES, INC. NOW!**

**BECOME A PART OF AN ORGANIZATION WHICH PROMOTES AND EDUCATES THE PUBLIC ABOUT NUTRITIOUS BEEF AND THE BEEF COMMUNITY.**

**HAVE FUN! WORK HARD! HELP US TO SAVE A GROUP OF PEOPLE THAT FEEDS THE WORLD!**

The Cowbelles coordinate with the Beef Council or host such activities as the Beef Ambassador Program, Agriculture in the Classroom, AZ Pioneer Luncheon, Educational Scholarships and Grants, Tucson Festival of Books, and Phoenix Cooks. They are active in Legislative and Ranching Issues, and Ways & Means Projects. The Cowbelles promote and educate the public about beef, and the many essential items made from beef byproducts and the basics of ranch life and the cattle community.

**Check the box to the left of the membership type below that describes your preference.**

<b>ASC Contribution</b> (Thank you for your donation): Event Sponsor, Event, Activity, Committee, Other	Event: Amount of donation - \$
<b>ARIZONA STATE COWBELLES, INC.</b> <b>Individual Membership Options</b> <input type="checkbox"/> \$15 Basic Membership _____ Dues Year <input type="checkbox"/> \$225 Lifetime (after 10 years active service) <input type="checkbox"/> \$25 Affiliation Dues _____ Dues Year  <i>Dues are payable Oct. 1; Delinquent Dec.31</i>	<b>Send check/money order corresponding to the box(es) marked on left to the address below.</b>  Name: _____  Address: _____  _____  State: _____ Zip: _____  <i>(Provide Street address and P.O. Box if appropriate)</i>  Phone: _____  Cell/Mobile Phone: _____  Month and Day of Birth: _____  e-mail: _____  <b>TOTAL ENCLOSED \$</b> _____  Check #: _____ Date: _____
<b>ASC Associate / Corporate Membership Options</b> <input type="checkbox"/> \$1000 Level <input type="checkbox"/> \$ 500 Level <input type="checkbox"/> \$ 100 Level	
<b>Arizona Local Cowbelle / Cattlewomen Dues</b> <input type="checkbox"/> \$ Basic Local Membership Dues <input type="checkbox"/> \$ Other Amount / Donation <input type="checkbox"/> _____ Dues Year  _____ <i>Name of Local</i>	
<b>AMERICAN NATIONAL CATTLEWOMEN, INC.</b> <b>Provide an individual check made out to ANCW.</b> <b>Individual Membership Options</b> <input type="checkbox"/> \$85 Sustaining Membership (\$25 Benefits Educational Programs) <input type="checkbox"/> \$60 Basic Membership <input type="checkbox"/> \$20 Collegiate or Junior Membership (under 18)	

**Make your checks payable to the Arizona State Cowbelles, Inc. and mail this form to:**  
**Arizona State Cowbelles, Inc.,**  
**c/o Mary Jo Rideout**  
**P. O. Box 1033**  
**Red Rock, AZ 85145**