

# APPLICATION AND MEMBERSHIP AGREEMENT

\_\_\_\_\_ 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: (\_\_\_\_) *FarmWeek* (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 _____	Telephone _____
Name _____	
(Please Print)	Last _____ First _____ Middle _____
Name _____	
Spouse/Civil Union Partner	Last _____ First _____ Middle _____
Address _____	
House Number/RR _____	Street _____
City/State _____	Zip Code _____
County _____	Township _____
E-mail Address _____	
Birth date _____	
Applicant	Spouse/Civil Union Partner

## QUALIFICATIONS

Individual Farm Owner: \_\_\_\_\_ Acres in \_\_\_\_\_  
(#) \_\_\_\_\_ County/State

Gross farm income \$2,500 or more per year

Individual Farm Owner: \_\_\_\_\_ Acres in \_\_\_\_\_  
(#) \_\_\_\_\_ County/State

Does not own or operate farm

Form of Ownership or Method of Operation: \_\_\_\_\_  
Occupation: \_\_\_\_\_

This is a joint membership.       This is an individual membership.

Have you ever been a Farm Bureau member? \_\_\_\_\_  
Signature of Applicant \_\_\_\_\_

Where? \_\_\_\_\_  
Signature of Spouse/Civil Union Partner \_\_\_\_\_  
When? \_\_\_\_\_  
(Required for Joint Membership)

Amount received from applicant \$ \_\_\_\_\_ Recommended by \_\_\_\_\_

Date \_\_\_\_\_ County Farm Bureau Board Action:    Approved     Voting     Non-voting     Rejected

**“Where Membership Means Value.”**