# RWDCA MEMBERSHIP APPLICATION

**Membership includes a subscription to "The Red Bloodlines":**

Adult Membership ..... $45 _____
Canadian Membership..... $60 _____
Foreign Membership..... $100 _____

**Name**_____

**Address**_____

_____

**Phone**_____

**Email** _____

**In making this membership application, I agree to abide by the rules and by-laws of the Association. Sign and date:**

**Sig.**_____**Date**_____

**Method of Payment:**

Cash _____
Check in U.S. Funds _____

Credit Card # - (Visa, Mastercard, Discover)
**Name of CC** _____

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Expiration Date: _____ CSC: _____

**MAIL TO;**
**RWDCA**
**P.O. BOX 579**
**WATERTOWN, WI 53094**

YOU CAN ALSO EMAIL TO: rwdcainfo@gmail.com

Any questions, please call or text 608-790-5595 | Fax: 608-299-0800

Website: https://www.redandwhitecattle.com

R·W·D·C·A