Associate Membership Form

You are invited to join the Montana CattleWomen, Inc.
We are a group of individuals who support the livestock industry in our community, state, nation, and the world.

Business Name: _____

Business Address:_____

_____

Primary Contact Info:

Name:_____

Number:_____

Email Address: _____

Name Of MCW Local Affiliate To Be
Credited For This Associate Membership: _____

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Associate Membership Dues - $50.00

These are annual dues with the year beginning October 1st. For any questions please contact Lorrie Vennes at montanacattlewomen@gmail.com

Please send this form and a check to the following address:
Montana CattleWomen
P.O. Box 184
Townsend, MT 59644