



MEMBERSHIP APPLICATION & INFORMATION FORM

Lonestar Junior Exhibition Poultry Club

Helping Build the Future Leadership of the Poultry World

Membership Information

Welcome! Please complete all applicable sections. Membership is not active until the completed application and annual dues have been received.

Membership Type	Annual Dues
Individual Membership	\$35.00 per year
Family Membership (3 or more children in the same household)	\$75.00 per year

Membership dues support educational programs, youth activities, awards, and club operations.

Member Information

Member Name: _____

Preferred Name: _____

Date of Birth: _____ Age: _____

Grade: _____

School or Homeschool: _____

Address: _____

City / State / ZIP: _____

Phone: _____ Email: _____

Parent / Guardian Information

Parent/Guardian #1: _____

Phone: _____ Email: _____

Parent/Guardian #2: _____

Phone: _____ Email: _____

Emergency Contact: _____ Relationship: _____

Phone: _____

Exhibitor Information

Years Exhibiting Poultry: _____

What types of shows have you had experience with: ☐ 4-H ☐ FFA ☐ Open Shows ☐ Other: _____

Species Exhibited: _____

Areas of Interest: _____

Parent/Guardian Volunteer Interests: _____

Member Code of Conduct

I acknowledge that I have received, read, and understand the Lonestar Junior Exhibition Poultry Club Code of Conduct. I agree to conduct myself in a manner that reflects the values, mission, and standards of the Club and to comply with all applicable Club policies, rules, and procedures during all Club meetings, events, activities, and programs.

I understand that failure to comply with the Code of Conduct may result in disciplinary action, including suspension or revocation of membership privileges, removal from Club activities, or other actions deemed appropriate by the Club's Board of Directors. I acknowledge that I have had the opportunity to ask questions regarding the Code of Conduct and agree to abide by its requirements as a condition of membership in the Lonestar Junior Exhibition Poultry Club.

☐ Acknowledged

Acknowledgement & Signatures

I certify that the information provided is accurate. By signing below, the member and parent/guardian acknowledge that they have read, understand, and agree to follow the Code of Conduct above.

Member Signature

Date

Parent/Guardian Signature

Date

Board Representative (Office Use)

Date

Office Use Only

Membership Number: _____

☐ Cash ☐ Check ☐ Online Payment

Amount Received: _____

Date Received: _____

Processed By: _____

Roster Updated: ☐ Yes ☐ No

Document Control

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