

# North Carolina Hereford Association 2026 Membership Form

*Please note this is a membership directory year.*

Name: \_\_\_\_\_

Farm Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State Zipcode: \_\_\_\_\_

Farm Address: \_\_\_\_\_

City, State Zipcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cellphone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website: \_\_\_\_\_

Farm Directions or Additional Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

- Please **do not** include my name on the list of possible future board of directors members. If you are paying for more than one membership on this form, please list all the names not wishing to be included on the list.

## Membership Dues are \$35.00

Please make check payable to:  
North Carolina Hereford Association or NCHA

Please mail the completed form to:  
North Carolina Hereford Association  
% Tammy Ward  
3404 Shady Grove Road  
Providence, NC 27315

Date Received:	
Check or Cash	
Amount :	