



Maryland Dairy Shrine Inc.

Established 1963

APPLICATION FOR MEMBERSHIP

Name _____ (Please print exactly as it should appear on certificate)

Complete Address _____

Phone Number _____ E-Mail _____

Farm Name, Organization, OR Connection with/interest in the dairy industry:

Lifetime Membership Donation \$20.00 x _____ \$ _____

General Donation \$ _____

Tax-deductible 501(c)(3) Total enclosed: \$ _____

Thank you for your support!!

**** Send completed form and check (payable to): Maryland Dairy Shrine, Inc., Dr. Matt Iager, 20608 Mill Point Road, Boonsboro, MD 21713**