



# Senior Membership Agreement 2018

**New York Holstein Association, Inc.**  
**840 Hanshaw Rd. - Suite #5**  
 Ithaca, NY 14850  
 (607) 273-7591  
 e-mail: jginzery@nyholsteins.com  
 Web site: www.nyholsteins.com

County #:  
 County Club Name:  
 State Member #:  
 Date Joined:  
 2017 Award Years:  
 National Mem #:

\_\_\_\_\_  
 Name- first, intial, last

\_\_\_\_\_  
 Street or Route

\_\_\_\_\_  
 City

\_\_\_\_\_  
 State

\_\_\_\_\_  
 Zip Code

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

\_\_\_\_\_  
 DOB

\_\_\_\_\_  
 Farm Prefix

\_\_\_\_\_  
 Phone Number

\_\_\_\_\_  
 Cell Number

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

I hereby join the New York Holstein Association, Inc. and agree to pay dues for the support of said Association on the basis of \$50.00 per membership plus \$ 1.50 per head for EVERY Registered Holstein cow that carries an 87% or higher R.H.A. (Registered Holstein Ancestry) in my herd that has calved, up to 500 milking age females per membership application and will abide by the By-laws of said Association.

The filing of this agreement in the New York office shall entitle the signer to all rights and privileges that accompany membership in the New York Holstein Association, Inc. as covered by the By-laws of the organization and/or directives of the Board of Directors, and one of the local Holstein clubs for the period ending December 31, 2018, **including a subscription to the New York Holstein News.**

Minimum dues per membership.....	<b>\$50.00</b>
Number of Registered animals in my herd that have ever calved _____ @ \$ 1.50 each(up to 500 cows).....	+ _____
Optional: Donation to New York Holstein Scholarship Fund(see enclosed letter).....	+ _____
Optional: One year Farmshine Subscription....(I save \$7.00).....	+ \$8.00
Optional: One year HolsteinWorld Exclusive Subscription .....	+ \$24.00
Two year HolsteinWorld Exclusive Subscription.....	+ \$45.00
Three year HolsteinWorld Exclusive Subscription.....	+ \$66.00
<b>Total Payment Enclosed (\$50 dues + \$1.50 per cow fee + optional(s) .....</b>	<b>\$ _____</b>

We accept AE Discover MC Visa

Card # \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_ CVV \_\_\_\_

I wish to receive my copy of the News.

Billing Address: \_\_\_\_\_

I DO NOT wish to receive my copy of the News.

I DO NOT wish to receive my copy of the News, please send it to the following non-member (complete information below).

Name \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

NYHA is always looking for potential new members. If you know of any person/ business in your area that may have an interest in joining our Association, please submit their name, address, e-mail and/or phone number on the back of this membership application. We will contact them and let them know of the benefits of membership in the New York Holstein Association.

Please indicate any changes or corrections to your name, address, e-mail and/or phone numbers, etc. on this form.  
 We always welcome any comments, suggestions, or requests.  
 If you would like to be on a committee, please check here and write us a note.

**Senior Membership:** Any individual, firm, partnership or corporation interested in, or engaged in the breeding of New York State Holstein cattle.

**New Member Incentive:** Each member who solicits a new Senior member will receive a \$10 check. A new Senior member is defined as anyone who has never been a member or has not been a member for 5 years or more. To receive the \$10 check, the soliciting member must sign the back of the new member's membership form.

**Soliciting Members Printed Name**

**Soliciting Members Signature**

**New Member Discount:** \* A new Senior member is defined as anyone who has never been a member or has not been a member for 5 years or more.

**October 1<sup>st</sup> thru June 30<sup>th</sup>**

\*New members (including Junior transfers) join at \$30.00 (a \$20.00 discount) plus, the established per Registered Cow Fee.

**July 1<sup>st</sup> thru September 30<sup>th</sup>**

**New Senior members** join at \$50.00 plus, the established per Registered cow fee.

**New Senior members** who join during this time period have extended membership dues and privileges through to December of the following year, 2019. (Example: If a **new** member joins during this time frame, say August 3, 2018, their membership is extended through to December 31, 2019.)

**Junior Transfers:** See New Member Discount **October 1<sup>st</sup> thru June 30<sup>th</sup>**.

**Retired Holstein Breeder Membership:** Qualifications are: 1. The person has been a NY Holstein Association Member for a **minimum of 45 years**. 2. The person has retired from active breeding for at least 5 years (i.e. no registration or transfer activity for 5 years). In meeting these qualifications, the member would become eligible for the New York Retired Holstein Breeder Membership at the rate of \$35.00. This membership gives them the privileges of the Association including voting and activities, and a subscription to the *News*. It **Does Not** give discounts on registrations and transfers. The Retired Holstein Breeder Membership would return to a regular membership and rate with any registration or transfer activities.

**Associate Breeder Membership:** Individuals with religious beliefs forbidding membership in organizations may apply for Associate Breeder status. This entitles Associate Breeders to register and transfer animals at member rates without joining the association. Associate Breeders are not listed anywhere that the public can see or obtain. The state association sends the Associate Breeder names to Holstein Association USA, explaining the reason for not being listed or contacted. Associate Breeders will pay the same membership fee as regular members, but do not have voting privileges.

**Appointed Memberships:**

**Honorary Membership:** Recognition for outstanding service to the New York State Holstein industry.

**Lifetime Membership:** Recognition for Individuals, Spouses and Joint memberships (partnerships) with 60 or more years of service to the New York State Holstein Association.

Potential New Member Information			
Name:	_____		
Address:	_____	City _____	State _____ Zip _____
Telephone Number:	_____ E-mail Address _____		