

# Texas Junior Polled Hereford Association Membership Application

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

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

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

DUES: \$10

Please send membership application to:

Texas Polled Hereford Association

P.O. Box 9

Rising Star, TX 76471

361-571-8742

Email: [manager@tpha.com](mailto:manager@tpha.com)

Website: [www.txpha.org](http://www.txpha.org)