



Membership Application

Name _____

Spouse's Name _____

Number of Children _____

Ages _____

RR, Box # or Street Address _____

City _____

State _____

County _____

Zip _____

Phone _____

Fax _____

E-mail _____

Website Address _____

Check all that apply:

Producer

Consumer

Farm Products Produced:

Corn

Cattle

Soybeans

Hogs

Wheat

Dairy

Other _____

Special Interests:

Consumer and/or Family Farm Advocacy

Sustainable/Alternative Agriculture

Other _____

Type of Membership: New Renewal

1 Year..... \$40

2 Year..... \$75

3 Year..... \$110

Lifetime \$1,000

Student..... \$10/year

Recruiter: _____

Send with payment to: Missouri Farmers Union, PO Box 1746, Jefferson City, MO 65102, or join online at www.missourifarmersunion.org.