

Liberty Hill Livestock Association
PO Box 350, Liberty Hill, TX 78642
lhlivestockassoc@gmail.com
Membership Form 2019

Parents:

Names: _____

Address: _____

1st Phone Number: _____ 2nd Phone Number: _____

Email(s): _____

Students:

Name: _____

Grade: _____ Age: _____ Animals showing: _____

Circle: 4H FFA

Name: _____

Grade: _____ Age: _____ Animals showing: _____

Circle: 4H FFA

Name: _____

Grade: _____ Age: _____ Animals showing: _____

Circle: 4H FFA

Name: _____

Grade: _____ Age: _____ Animals showing: _____

Circle: 4H FFA

I acknowledge I have received a copy of the LHLA Bylaws. I understand the qualifications and will abide by them.

Parent Signature: _____ Date: _____

LHLA USE ONLY

Date Received: _____ Paid by Cash: _____ or Check#: _____

Received by: _____