

American Satin Rabbit Breeders Association, Inc.
Club Affiliation Application

YEAR _____ NEW RENEWAL

CLUB NAME _____
Enter name exactly as it appears on your ARBA Charter.

PRESIDENT _____

ADDRESS _____

VICE-PRESIDENT _____

ADDRESS _____

SECRETARY _____

ADDRESS _____

TREASURER _____

ADDRESS _____

DIRECTOR _____

ADDRESS _____

DIRECTOR _____

ADDRESS _____

DIRECTOR _____

ADDRESS _____

DIRECTOR _____

ADDRESS _____

DIRECTOR _____

ADDRESS _____

Number of Club Members _____

Please send a copy of your Constitution and By-Laws if this is a new application, or if this is a renewal and you have made changes. Include the complete form along with the correct fees, according to the ASRBA By-Laws. Send to: Sherry Garrett, 18902 7 Mile Rd., Reed City, MI 49677