

**Membership Application Form
South Central Llama Association
(www.scla.us)**

Name: _____

Ranch Name: _____

Address: _____

City: _____ State: _____ Zip _____

Phone : (_____) _____ Email: _____

_____ Please DO NOT print my name in the Membership Directory (handed out to the public)

Annual Membership Fee: \$40.00 Adult memberships. **All memberships expire January 31st of each year.**
\$20.00 for first-time members who join after July 1.

Please mail a copy of this membership form with your check (payable to SCLA) to:

**SCLA MEMBERSHIP
P.O. Box 163654
Austin, TX 78716**

**Associate Youth Membership Application Form
South Central Llama Association
(www.scla.us)**

Youth Name: _____

Ranch Name: _____

Address: _____

City: _____ State: _____ Zip _____

Phone : (_____) _____ Email: _____

Date of Birth _____

Name & Address of SCLA Adult Sponsor:

_____ Please DO NOT print my name in the Membership Directory (handed out to the public)

Youth Associate Memberships are non-voting and expire January 31st of each year.

Annual Membership Fee: \$10.00 per youth, ages 5-19.

\$ 5.00 for first-time members who join after July 1.

Please mail a copy of this membership form with your check (payable to SCLA) to:

**SCLA Membership
P.O. Box 163654
Austin, TX 78716**