



Dues are NOT deductible as charitable contributions or as Farm Business Expenses.

CONTROL NUMBER _____

FARM BUREAU MEMBERSHIP APPLICATION & AGREEMENT AND RURAL HEALTH MEMBERSHIP AGREEMENT

___ NEW ___ CHANGE CIVIL DISTRICT ___

PROPOSED CLASSIFICATION

- ___ VOTING
___ ASSOCIATE
___ ASSOCIATE FARMER

APPLICANT NAME (S) PLEASE PRINT

FIRST MIDDLE LAST SUFFIX TITLE

BUSINESS NAME

ADDRESS LINE 1 LINE 2 CITY STATE ZIP

COUNTRY IF OTHER THAN USA

HOME PHONE WORK # CELL #

hereby applies for a family membership in the County Farm Bureau, renewable annually, and through its affiliation with the Tennessee and American Farm Bureau Federations. The applicant agrees to support the organization's mission...

The applicant hereby tenders payment of the initial \$25 annual membership fee by cash, attached check, or automatic withdrawal authorization.

EFT PAYMENT ___ Yes, I wish to have my membership paid by bank draft from my account.

Routing # Account # Initials

SIGNATURE DATE SIGNED

Terms of EFT Agreement

As a convenience to me, I hereby request and authorize you to pay and charge to my bank account, checks in the amount of the cost of my FB membership dues. Each check will be drawn annually during the same month as this authorization made payable to the order of the Tennessee Farm Bureau Federation, Columbia, Tennessee, provided there are sufficient collected funds in said account to pay the same upon presentation.

I further agree that if any such check be dishonored, whether with or without cause, and whether intentionally or inadvertently, you shall be under no liability whatsoever, even though such dishonor results in the forfeiture of membership.

Membership Transfer Authorization

As a convenience to me, if I move to another county in Tennessee, I request my membership be automatically transferred to that county Farm Bureau subject to its approval process.