



Which best describes your occupation?

(Check only one please)

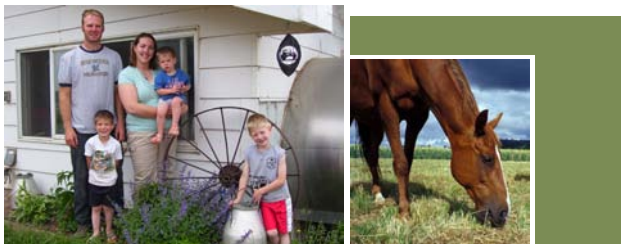
- I own, operate, or manage a farm.
- I work on a farm.
- I work in an ag-related business.
- I am a retired farmer.
- Other: _____

I would like more information on...

- Ag in the Classroom
- Young Farmer & Agriculturist Program
- Leadership Training
- WFB Foundation

Wisconsin Membership Farm Bureau Application

Thank you for joining the Farm Bureau family.



Wisconsin Farm Bureau Federation

Temporary Membership Card

Wisconsin Farm Bureau Federation
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Madison, WI 53705
1.800.261.FARM

www.WFBF.com

Wisconsin Farm Bureau Federation

Farm Bureau

is Wisconsin's **largest general farm organization**, representing farms of **all size, commodity type and management style**.
A Voice for Farmers...A Vision for Agriculture.

Our Vision

Lead a **growing and dynamic** agriculture.

Our Mission

Lead the farm and rural community through **legislative representation, education, public relations, and leadership development**.



Annual Dues

Locate appropriate dues for your county below. Membership dues include a subscription to Farm Bureau's Rural Route.

Adams	45	Juneau	45	Richland	45
Barron	45	Kenosha	45	Rock	47.50
Brown	40	Kewaunee	45	Rusk	45
Buffalo	45	La Crosse	45	St. Croix	45
Calumet	50	Lafayette	48	Sauk	47
Chippewa	45	Langlade	48	Sawyer	45
Clark	45	Lincoln	45	Shawano	45
Columbia	45	Manitowoc	50	Sheboygan	45
Crawford	45	Marathon	45	Taylor	45
Dane	45	Marinette	45	Trempealeau	50
Dodge	45	Marquette	50	Vernon	45
Door	43	Milwaukee	45	Walworth	55
Dunn	45	Monroe	45	Washington	45
Eau Claire	45	Oconto	45	Waukesha	45
Fond du Lac	50	Outagamie	50	Waupaca	47
Grant	45	Ozaukee	43	Waushara	45
Green	45	Pierce	45	Winnebago	47
Green Lake	45	Polk	45	Wood	45
Iowa	50	Portage	45	Superior	
Jackson	45	Price	45	Shores	45
Jefferson	45	Racine	50		

Welcome to our Farm Bureau Family



Name: _____

Date of Birth: _____

Spouse's Name: _____

Date of Birth: _____

Address: _____

City, State: _____ Zip: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Email Address: _____

Would you like to receive Ag NewsWire, the weekly email newsletter from WFBF? Yes

Would you like a Rural Mutual Insurance Agent to contact you? Yes

Membership Type: Associate Voting

County: _____ Township: _____

Amount Paid: _____ Date: _____

Membership Worker: _____

1.2011
For office use only
Member #

County #

V/A

Temporary Membership Card

(Retain for your records)



Name: _____

Date I became a member: _____