

**MAIL IN**  
**SANTA BARBARA COUNTY CATTLEWOMEN**  
**Application for Membership Form**

Date of Application:

Last Name:

First Name:

Husband's Name:

Address:

City, State, Zip:

Ranch Name:

Email:

Home Phone:

Cell Phone:

**REGULAR MEMBERSHIP:**

Are you or have you been actively engaged in the Cattle Industry? Yes / No

Are you, your husband or child a member of:

Santa Barbara County Cattlewomen Association Yes / No

Santa Barbara County Cattlemen's Associations Yes / No

California Cattlewomen's Association Yes/No

California Cattlemen's Association Yes / No

Name on Membership:

Relationship to member:

**If any of the above answers are yes, do not fill in the following:**

THE NAMES OF (2) FRIENDS WHO ARE CURRENTLY SBCCW MEMBERS

SBCCW Members:

1.)

2.)

What talents do you have that you would be willing to share with our group? (Teach, Art Design, bake, etc.)

How did you hear about SBCCW and what brings you to join?

**ASSOCIATE MEMBERSHIP ONLY: (\$15)**

Which other Affiliate Unit are you a member of:

**Annual Membership Dues are for Fiscal Year November 1 through October 31.**

SB County CattleWomen Dues \$20

California CattleWomen Dues \$25

**Total for County & State \$45**

❖ **Membership in CCW is mandatory unless you are a CCW member in another County (Associate)**

❖ **If you would like to be a member of the American National Cattle Women's Association, visit**

**[ancw.org](http://ancw.org)** Your dues are considered delinquent after November 1st.

**Please make checks payable to the *Santa Barbara County Cattle Women***

**Send application with payment to:**

Jackie Jaenicke  
4267 E Hwy 246  
Lompoc, CA 93436  
(805) 705-5576

**Thank you for your support and participation!**