

Pack Llama Trail Association Membership Form Duplicate as Needed - Please Print

Rev	. (12	123	1/1	7

× .		
Associate \$10 annual fee {Associate	es are insured at PLTA events, but do no	ot any other membership privileges}
☐ Check this box if you do NOT want your ☐ Check this box if you do NOT want your		
If this is a new registration or a renewal and o	contact information has changed, pl	ease complete the following:
Name*:	Farm/Ranch:	
Address:		
City:	State:	Zip:
Phone: Email:	!	
*Includes one individual only and may be additional \$25.00	rolled into a Membership within the	same calendar year by paying an
Member \$30 annual fee {Members ar	e insured at events, have voting rights,	full website access, and other privileges}
☐ Check this box if you do NOT want you ☐ Check this box if you do NOT want you		
If this is a new membership, or a renewal and	d contact information has changed,	please complete the following:
Member Name(s)*:		
	Farm/Ranch ² :	
Address:		
City:	State:	Zip:
Phone: Email:	:	
*Includes up to two adults (18 years residence, regardless if the children own		_
¹ ILR Numbers are not required but are a ver- Records. We encourage you to include this ir		Fees:

²Include Farm/Ranch Name if applicable

The PLTA does not share **contact information** outside the organization without permission to do so. Member information is made available to other members unless you specifically request otherwise.

-ees:		

Associate:

Member:

► Total: