RagaMuffin Associated Group Application for Membership



Name: (Mr/Mrs/Ms) First N	Middle Initial Last				
Address:					
Telephone Number: Home:	Cell:	Fax:			
Telephone Number: Home: E-mail Address: I currently own RagaMuffin(s). Th	Website URL:	1 ux.			
I currently own RagaMuffin(s). Th	eir names are:				
I acquired my RagaMuffin(s) from:					
Please use the back of this form if necessary.					
Information in this section is requested, but optional:					
Spouse/Partner's Name:	Birthdate:				
Children's Names and ages: Occupation:					
Occupation:	Hobbies:				
Application is being made for	the following: (Cheek es	annliaghla)			
Regular Breeder Member (Must have con	<u> </u>	/			
☐ Apprentice Breeder: (Entry Level Membe		•			
☐ Owner/Fancier Member					
☐ Family Membership.		_			
Family Member: First Initial	Last	Relationship			
The Membership Year runs from January	1 to December 31. Dues ar	e prorated monthly			
after June 30. Prorated dues paid in conjunction with the following year's membership					
fee, will entitle the member to one month free membership. Family Memberships are not					
eligible to be prorated.					
Please mail completed application and app	propriate dues to:				
	1st Street, Jenks, OK 7403	37			
Signature of Applicant:	Date:				
Please make check payable to RAG. Am	it Enclosed: Cl	neck No.:			
Payment may also be made with PayPal to	E :1 A 11 D M CC	Craynailaam			
Tayment may also so made with Tayrar to	E-maii Addy: Ragaiviumin	iGroup@gman.com			
THIS SECTION MUST BE COMPLETED IF A	APPLYING FOR BREEDER N	MEMBERSHIP			
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