



American Canary Fanciers Association

Membership Application for year: _____ - PRINT CLEARLY

New Member: ___ Renewal:___ New Address:_____ New Phone:_____

NAME: (please print) _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (please list cell #) _____

Email: _____

EMAIL REQUIRED TO RECEIVE NEWSLETTERS

Membership for one year \$25.00 and runs from Jan 1st to Dec 31st

Please Check all Birds You Breed

- | | | |
|---|--|--|
| <input type="checkbox"/> Border | <input type="checkbox"/> Berner | <input type="checkbox"/> Belgium Fancy |
| <input type="checkbox"/> Gloster | <input type="checkbox"/> American Singer | <input type="checkbox"/> Scot Fancy |
| <input type="checkbox"/> Yorkshire | <input type="checkbox"/> Timbrado | <input type="checkbox"/> Lancashire |
| <input type="checkbox"/> Norwich | <input type="checkbox"/> Frill | <input type="checkbox"/> Fife |
| <input type="checkbox"/> Columbus Fancy | <input type="checkbox"/> Lizard | <input type="checkbox"/> Lipochrome |
| <input type="checkbox"/> Stafford | <input type="checkbox"/> Old Crested | <input type="checkbox"/> Melanin Classic |
| <input type="checkbox"/> Domestic Hartz | <input type="checkbox"/> Crest Bred | <input type="checkbox"/> Melanin New Color |
| <input type="checkbox"/> Waterslager | <input type="checkbox"/> Irish Fancy | <input type="checkbox"/> AGI |

Make check or money order payable to ACFA

Mail to: Ragi Abboud

5349 Overing Dr.

Woodland Hills, CA 91367

rabboud898@gmail.com

FULL RELEASE OF ALL CLAIMS

In consideration of my participation in the AMERICAN CANARY FANCIERS ASSOCIATION and any and all of its events, I the undersign, intending to be legally bound, for myself, my heirs, executors and administrators, do hereby fully and finally waive, release and hold harmless, the AMERICAN CANARY FANCIERS ASSOCIATION and their respective directors, officers, employees, members, agents and assignees, from any and all responsibility, claims, causes of action, injuries, judgments, or other damages of any nature whatsoever, including but not limited to, any personal injuries I might suffer, directly or indirectly, resulting from my participation in, or travel to and from the aforesaid activity. By signing below, I swear that I am 18 years old or older and will accept the by-laws and terms and conditions of membership hand have read the Articles of Incorporation. I acknowledge that I am engaging in the aforesaid activity, and knowingly executing this release, at my insitences, and request, and that I voluntarily do so without coercion whatsoever. Note: you may wish to print a copy of the by-laws for future reference. By signing you acknowledge that you have also read the ACFA Bylaws.

SIGNATURE: _____ DATE: _____



American Canary Fanciers Association

Band Order Form for Year: _____

Band Information

The American Canary Fanciers Association provides its members with closed traceable serialized leg bands for their birds. The Band Secretary will track all band numbers and provide information as to the Breeders. There will be no individualized breeder identification on the bands. This helps to provide security for each breeder and makes the bands much easier to read as there is less information printed on each band. What appears on each band is the Club's initials "ACFA" and a serial number.

Please Note: Membership dues **MUST** be current before bands will be shipped. **A shipping/handling fee charge of \$6.00 will be added to the cost of the bands below if shipping is requested.** Please allow enough time for processing/mailing. You can request the bands be brought to the monthly meeting and no shipping/handling charge will be added.

Members need to contact Band Secretary below to check on availability.

Quantity Price: 25 = \$10.00: 50 = \$20.00: 75 = \$30.00: 100 = \$40.00:

Please note that bands are sold in sets of 25 only

Quantity Requested: _____

Request Bands Shipped: _____ ***(include the \$6 shipping or bands will not be shipped)***

Request Bands Delivered at Monthly Meeting: _____

Amount Enclosed: _____

Name (please print): _____

Address: _____

City/State/Zip: _____

Email: _____

SIGNATURE: _____ Date: _____

Make check or money order payable to: ACFA and send to below address

Ragi Abboud

5349 Overing Dr

Woodland Hills, CA 91367

rabboud898@gmail.com