

SOUTH TEXAS HEREFORD ASSOCIATION

NAME: _____

RANCH NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** ____ **ZIP:** _____

PHONE: _____ **Cell** _____

EMAIL: _____

Membership Fee: \$20.00 per year

Please return to:

South Texas Hereford Assn.

c/o Sara Lanham

P.O. Box 697

Beeville, TX 78104

210-844-4806 (cell)

Email: southtexashereford@gmail.com

Fax 361-358-7338

www.southtexashereford.org