



# Chinook Breeder Co-op Membership Application

**Office**

PO Box 3217, Claresholm, Alberta T0L 0T0  
Phone: 403-625-9363  
Email: chinookbreedercoop@gmail.com


**Contacts**

Administrator: Kim Grayson - Office 403-625-9363  
Supervisor: Brad Sawley - Cell 403-336-8304

<b>Full Legal Name of Applicant (Individual, Partnership, Corporation)</b>	
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\*\*\* Please make sure to indicate the amount you are requesting below

Applicant #1 Information:		Date of Application:		Requested \$ Limit:	
FULL Legal Name or Business Name you will be borrowing under:				Type of Livestock (intended to be purchased):	
Mailing Address:			Legal Land Location (include range road and township road #):		
Town:	Province:	Postal Code:	GST #:		
Home Phone:	Cell #:	Fax #:			
Date of Birth:	SIN #:	Driver's License #:			
Email Address:			MD Gate Sign #		
Property Directions:			Corporate or Partnership Name & Corporate Registration #:		
Bank (Branch, contact info):			For Corporate Members - Shareholder Full Legal Name, %, Title		
Credit Reference #1 (name & contact info):			For Corporate Members - Shareholder Full Legal Name, %, Title		
Credit Reference #2 (name & contact info):			For Corporate Members - Shareholder Full Legal Name, %, Title		
Off Farm Employer:		Occupation:	How many years?		
Spouse's Legal Surname:		Given Name:	Middle Name:		
Cell Phone #:	Spouse Birth Date:	Are you a Canadian Citizen?		Are you a resident of Alberta?	
Applicant #2 Information:					
FULL Legal Name or Business Name:					
Mailing Address (if different from above):			Legal Land Location (include range road and township road #):		
Town:	Province:	Postal Code:	GST #:		
Home Phone:	Cell #:	Fax #:			
Date of Birth:	SIN #:	Driver's License #:			
Email Address:			MD Gate Sign #:		
Property Directions: (if different than above)					
Bank (Branch, contact info):					
Credit Reference #1 (name & contact info):					
Credit Reference #2 (name & contact info):					
Off Farm Employer:		Occupation:	How many years?		
Spouse's Legal Surname:		Given Name:	Initial:		
Cell Phone #:	Spouse Birth Date:	Are you a Canadian Citizen?		Are you a resident of Alberta?	
Do you own/lease land in Alberta?		Yes	No	# Acres Owned	Rented

Landlord Name and Legal Land Description of rented or leased land:					
Have you ever been a member of another Feeder or Breeder Association?					
If yes, which one(s):					
What are your existing numbers of livestock?					
Bulls	Bred Cows	Steers	Dry Cows	Ewes	Goat Does
Bred Hfr	Cow / Calf Pairs	Heifers	Rams/Bucks	Lambs	Goat Kids
What is your own registered brand and location?			Brand to be used & location preference: (CIRCLE ONE)		Shelter over Diamond
LS	LR	LH	RS	RR	RH
<b>Experience &amp; Facilities</b>					
How long have you been involved in the livestock industry?					
How long have you raised cattle/sheep/goats?					
Land Location where your livestock will be fed or kept:					
Please list available facilities (ie: sheds/barns/corrals/etc.):					
Do you have sufficient feed on hand for the livestock?    Yes    No					
Feed on hand:	Hay (tonnes)	Green Feed (tonnes)	Straw (tonnes)	Silage (tonnes)	Grain (bu)    Other
Will this livestock be pastured in a community pasture or custom feedlot? If so, which one? A Custom Feeding Agmt will be required.					
If yes, Allotment:					
Do you know any of the Board of Directors?    Yes    No                      If Yes, who?					
How did you hear about Chinook Breeder Co-op?					
<b><u>Authorization</u></b>					
I hereby certify that the above information is correct and true, and if my application is approved, I agree to abide by the rules and regulations of Chinook Breeder Co-op. I also understand that Chinook Breeder Co-op, in conjunction with ATB, has the right to accept or refuse this application and/or the livestock (if these animals do not meet the requirements as set out by the applicable Co-op). I further give permission for Chinook Breeder Co-op to perform all needed credit or facility checks, and personal property searches as deemed necessary by either Co-op and/or ATB Financial.					
Dated this _____ day of _____, 20_____ at _____, Alberta.					
X			X		
Applicant #1 Signature			Applicant #2 Signature		