

**Join the Northeast Iowa Dairy Foundation & contribute to the future of the dairy industry!**

Name \_\_\_\_\_

Farm/ Company name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ County \_\_\_\_\_

Email \_\_\_\_\_

**I wish to join / give to the Dairy Foundation at the following level:**

- Dairy Producer Member Annual \$25
- Dairy Producer Member Lifetime \$250
- Please accept my enclosed membership and additional gift.
- Affiliate Member Annual \$25
- Affiliate Member Lifetime \$250
- Please accept my donation.
- Please credit \$250 as my annual corporate membership.
- Please credit \$2500 as my lifetime corporate membership.



*Lifetime membership includes permanent recognition at the Dairy Center.*

**Thank you for your membership and/or contribution.  
A receipt will be mailed to you.**

**Mail to:** Northeast Iowa Dairy Foundation, Attn: Mariah Schmitt, P.O. Box 400, Calmar, IA 52132

*Please make checks payable to the Northeast Iowa Dairy Foundation.*

**Please mail this form and your contribution to:**

Mariah Schmitt  
Northeast Iowa Dairy Foundation  
PO Box 400  
Calmar, IA 52132