

www.cdnangus.ca email: cdnangus@cdnangus.ca

292140 Wagon Wheel Blvd, Rocky View County, AB T4A 0E2 ● Phone: (403) 571-3580 ● Fax: (403) 571-3599 ● Toll-Free: 1-888-571-3580

Membership Ownership & Name Request for Revision

CURRENT MEMBERSHIP NAME:					
Membership # (if known):					
Owners/names to be removed (all owners/below):	names to be	removed from membe	ership must	acknowledge re	emoval by signing
Printed Name:	Signatu 	re:		Date:	
					_
NEW MEMBERSHIP NAME:					
The following names will be the owners on account and any additional names. (please					
Printed Name:		Printed Name:			
					_
					-
I am the current signature holder on the Carevision has been requested:	anadian Angu	s Association records	s, and I am a	ware that the re	equest for
Printed Name (Owner retaining account)	Signature		Date		

Return the completed form to:
Canadian Angus Association
292140 Wagon Wheel Blvd, Rocky View County, AB T4A 0E2
Fax: (403) 571-3599 email: registry@cdnangus.ca