

Show-Me Deer Management Cooperative Membership Agreement

Name

Address

City/State/ZIP

Telephone number

Email address

1. I own _____ acres within the proposed boundaries of the Cooperative.
(OR)
I control access to _____ acres owned by _____, which are located with the proposed boundaries of the Cooperative.
(OR)
I have received permission to have hunting rights on _____ acres, owned by _____ which is located within the proposed boundaries of the Cooperative.
2. I agree to support the goals that have been identified by and assist with the wildlife management recommendations of the Show-Me Deer Management Cooperative.
3. I agree to protect fawns and yearling bucks from harvest.
4. I agree to make a good-faith effort at promoting this Cooperative to my neighbors and hunters.
5. I understand that this agreement is not binding and I am in no way obligated to the Cooperative.
6. This agreement does not give any unauthorized person the right to trespass on the above-listed property.
7. Annual membership dues are \$10, and all memberships expire on Dec. 31 of each year.
8. I would be interested in serving on a committee if needed (circle one): Yes No

Signature

Date

Please mail completed agreement to: Show-Me Deer Management Cooperative, P.O. Box 000, Record Book Bucks, MO 11111
