

## JAMAICA PIG FARMERS ASSOCIATION MEMBERSHIP APPLICATION FORM



MEMBER INFORMATION							
Company Name (If Any):				REGISTRATION No: RECEIPT No:			
				Œ O	ee • 1 T		
FIRST NAME:		MIDDLE NAME:		(For Official Use Only) SURNAME:			
FIRST NAME.		WIIDDLE N.	AWIE.	SURIN	MAIL.		
RESIDENTIAL ADDRESS	2.	BUSINESS	A DDDECC.	ID TYI	DF.	IDENTIFICATION No:	
Street:		Street:	ADDRESS.		RS LICENSE	IDENTIFICATION NO.	
				PASSP			
				NATIO	NAL ID		
District:		District:		GEND	_	DATE OF BIRTH:	
				MALE FEMAI	LE 🗆	(MM/DD/YYYY)	
Post Office:		Post Office:		TRN		(1,11,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1	
Parish:		Parish:		EMAIL ADDRESS:		COMPUTER LITERACY:	
						YES □ NO □	
Direction:		Direction:		EDUC	ATION LEVEL	INTERNET ACCESS	
				NONE		NONE	
TELEPHONE (Land):		TELEPHONE (Land):		PRIMA	_	HOME	
				SECON TERTIA	NDARY □ ARY □	OTHER	
				IEKII	AKI 🗆		
TELEPHONE (Mobile):		TELEPHONE (Mobile):		FAX-LINE:			
OPERATIONAL INFORMATION							
OPERATIONAL PARISH:				OPERATIONAL DISTRICT:			
LAND INFORMATION: OWNED □ LEASED □ RE				ENT OTHER O			
SYSTEMS OF PRODUCT	TION:	TYPE OF BREEDING:		TYPE OF MARKET			
FARROW TO FINISH FARROW TO WEANING FINISH ONLY		ARTIFICIAI	INSEMINATION □	PROCESSORS □ BUTCHERS □			
		NATURAL (	(BOAR)				
		BOTH		DIRECT MARKET □ OTHER □			
TOTAL SOWS: TO	OTAL BO	ARS:	TOTAL PIGLETS:	1	TOTAL WEANER	S: TOTAL FINISHERS	5
I the undersignee wish to become a member of the Jamaica Pig Farmers' Association (JPFA). I enclosed the due amount of							
\$to cover all initial cost (registration and membership). I also agree to share my information with other registered agriculture stakeholders to support the industry and understand that its use and distribution is at the discretion of the JPFA.							
Applicant's Signature	Date Certifying Officer Date Signature						
	* Two (2) Recent Passport size photographs * TRN * Proof of ID (eg. Driver's license, Passport, National ID)						
Requirements	*Proof of Address (eg. Utility bill)						