Marion FFA Membership Registration & Ag Class Information 2026 - 2027

STUDENT INFORMATION: ***Complete all student items for EACH participating student. Additional student space on the back****

#1 Student Full Name: _____ **Student ID #:** _____ **Campus:** _____

Social Security #: _____ - ____ - _____ **Grade:** _____ **Date of Birth:** ____/____/____ **Cell #:**_____

Address: _____ **City, State, Zip:** _____

Home Phone #: (_____)_____ **Best method of contact for student:**_____

Agricultural Science Course(s) Currently Enrolled In: (Teacher & Period)

_____

#2 Student Full Name: _____ **Student ID #:** _____ **Campus:** _____

Social Security #: _____ - ____ - _____ **Grade:** _____ **Date of Birth:** ____/____/____ **Cell #:**_____

Address: _____ **City, State, Zip:** _____

Home Phone #: (_____)_____ **Best method of contact for student:**_____

Agricultural Science Course(s) Currently Enrolled In: (Teacher & Period)

_____

PARENT/GUARDIAN INFORMATION: ***One complete form of parent contact information is required per family***

(Please indicate if separate mailings are necessary, and supply address and/or email)

Guardian1/Father: _____ **Separate Mailing: Yes / No**

Home Address: _____ **City, State, Zip:**_____

Work Phone #: (_____)_____ **Cell Phone #:** (_____)_____

Email Address: _____ **Best method of contact:**_____

Guardian2/Mother: _____ **Separate Mailing: Yes / No**

Home Address: _____ **City, State, Zip:**_____

Work Phone #: (_____)_____ **Cell Phone #:** (_____)_____

Email Address: _____ **Best method of contact:**_____

PARENT/GUARDIAN CONSENT FOR PARTICIPATION IN SCHOOL BASED ORGANIZATIONS

Pursuant to Texas Senate Bill 12, school districts must obtain written parent/guardian consent for a student to participate in any student club or organization, including co-curricular and extracurricular groups.

_____ Yes, I give permission for my student to participate in the FFA Organization/ Marion FFA.

_____ No, I do not give permission for my student to participate in the FFA Organization/Marion FFA.

Yes / No: Permission to use child's photo in publications (please circle one)

Parent/Guardian Name (Print): _____ Signature: _____ Date: _____

MARION FFA & BOOSTER CLUB MEMBERSHIP DUES AND FEES

** Cash (exact change) or check (made out to **Marion FFA Booster Club**) or online at www.marionffa.org*

Student FFA Membership $25 each X _____=_____

FFA Booster Club Membership $25/family X _____=_____

TOTAL: $ _____ Cash / Check / online Received by: _____

***** THIS IS NOT STOCKSHOW ENTRY FORM. THOSE FORMS WILL BE DONE AT NOVEMBER MEETING. *****

#3 Student Full Name: _____ **Student ID #:** _____ **Campus:** _____

Social Security #: _____ - ____ - _____ **Grade:** _____ **Date of Birth:** ____/____/____ **Cell #:**_____

Address: _____ **City, State, Zip:** _____

Home Phone #: (_____)_____ **Best method of contact for student:**_____

Agricultural Science Course(s) Currently Enrolled In: (Teacher & Period)

_____

#4 Student Full Name: _____ **Student ID #:** _____ **Campus:** _____

Social Security #: _____ - ____ - _____ **Grade:** _____ **Date of Birth:** ____/____/____ **Cell #:**_____

Address: _____ **City, State, Zip:** _____

Home Phone #: (_____)_____ **Best method of contact for student:**_____

Agricultural Science Course(s) Currently Enrolled In: (Teacher & Period)

_____

#5 Student Full Name: _____ **Student ID #:** _____ **Campus:** _____

Social Security #: _____ - ____ - _____ **Grade:** _____ **Date of Birth:** ____/____/____ **Cell #:**_____

Address: _____ **City, State, Zip:** _____

Home Phone #: (_____)_____ **Best method of contact for student:**_____

Agricultural Science Course(s) Currently Enrolled In: (Teacher & Period)

_____

#6 Student Full Name: _____ **Student ID #:** _____ **Campus:** _____

Social Security #: _____ - ____ - _____ **Grade:** _____ **Date of Birth:** ____/____/____ **Cell #:**_____

Address: _____ **City, State, Zip:** _____

Home Phone #: (_____)_____ **Best method of contact for student:**_____

Agricultural Science Course(s) Currently Enrolled In: (Teacher & Period)

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