


----- **Print and return form or renewal before March 15th of (2023)** -----

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Payment: Date** \_\_\_\_\_ **Payment Method** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Mail to:** Brian Fischer, 55458 Cty Rd 21, Courtland, MN 56021  507-276-6322