



LABRADOR RETRIEVER CLUB OF THE PIONEER VALLEY, INC.

APPLICATION FOR MEMBERSHIP

Name(s): _____

Address : _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email: _____

Occupation: _____ Work Phone: _____

Day & month of birth: _____

•Membership in the Club is open to all persons who are 18 years of age or older, who are in good standing with the American Kennel Club, who are sponsored by two members of the LRCPV and who are accepted under the constitution and by-laws of the LRCPV, Inc.

•Our membership policy requires the signature of two members of the Club for acceptance. The prospective member is required to be present at the meeting at which he/she is to be read in and also at the meeting that his/her application is to be voted upon.

•Dues for membership in the Club are \$30.00 individual/\$35 family per year and must be paid with application. Please make checks payable to "LRCPV".

I hereby state that I understand and agree to abide by the constitution and by-laws, rules and regulations and policies of the LABRADOR RETRIEVER CLUB OF THE PIONEER VALLEY, INC.

I/we enclose \$_____ to cover the annual dues for _____ membership.

Applicant's Signature

Date

Applicant's Signature

Date

The following information is required by the AKC for sanctioning/licensing. Please attached additional sheet if necessary.

1.What other dog clubs do/did you belong to, and what positions do/did you hold?

2.How many and what breeds of dogs do you own? List the names and registration numbers of registered dogs you own. (If you own more than 10, please list only 10).

3.Have you ever whelped any litters? What are the litter registration numbers and the whelping dates of each? (If more than 10, list only 10)

4.Have you ever exhibited in the field, breed or obedience? If so, how many events per year do you attend on average?

5.Which events have you regularly attended? On what dates?

6.What other dog related activities do you participate in? (Judging matches, licensed judge, stewarding, training field/obedience).

7.How many and what AKC titles/certificates have you earned?

ENDORSER'S AREA

Please be sure entire form is filled out.

Please be sure all areas are completed.

Member #1 PRINTED NAME

SIGNED

Member #2 PRINTED NAME

SIGNED

FOR SECRETARY'S USE ONLY:

Application:

Rec'd. _____ Ackn. _____ Read _____ Voted _____ Results _____ Infm'd _____

Rec.d Const/By-Laws _____ Rules/Policies _____