

South Eastern Ontario Region Newfoundland Dog Club of Canada



Membership Application

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------------------|
| Name of Applicant 1 | | Name of Applicant 2 | |
| Street Address | | | |
| City | Province | Postal Code | |
| Phone () | Email | | |
| Are you a member of the NDCC? <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you a member of the CKC? <input type="checkbox"/> Yes <input type="checkbox"/> No | CKC Membership # | |
| Sponsor's Name | | | |
| Name of Dog 1 | | Sex <input type="checkbox"/> Male <input type="checkbox"/> Female | Neutered / Spayed <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Age <input type="checkbox"/> Months <input type="checkbox"/> Years | Level of Obedience Training | | Titles (i.e. CD, DD, WRD) |
| Name of Dog 2 | | Sex <input type="checkbox"/> Male <input type="checkbox"/> Female | Neutered / Spayed <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Age <input type="checkbox"/> Months <input type="checkbox"/> Years | Level of Obedience Training | | Titles (i.e. CD, DD, WRD) |
| Name of Dog 3 | | Sex <input type="checkbox"/> Male <input type="checkbox"/> Female | Neutered / Spayed <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Age <input type="checkbox"/> Months <input type="checkbox"/> Years | Level of Obedience Training | | Titles (i.e. CD, DD, WRD) |
| Are you interested in? (Check all that apply) | | | |
| <input type="checkbox"/> Carting | <input type="checkbox"/> Water Rescue | <input type="checkbox"/> Backpacking | <input type="checkbox"/> Tracking |
| <input type="checkbox"/> Parades | <input type="checkbox"/> Therapy Work | <input type="checkbox"/> Grooming Lessons | <input type="checkbox"/> Organizing Events |
| Can you attend events or meetings on: <input type="checkbox"/> Saturdays <input type="checkbox"/> Sundays <input type="checkbox"/> Both <input type="checkbox"/> Occasionally | | | |

I/WE AGREE TO ABIDE BY SEOR-NDCC BY-LAWS AND CONSTITUTION and AUTHORIZE THE SOUTH EASTERN ONTARIO REGION OF THE NEWFOUNDLAND DOG CLUB OF CANADA TO RELEASE AND USE MY/OUR CONTACT INFORMATION FOR CLUB PUPPOSES.

Signature of Applicant(s)

Date

| | |
|-----------------|----------------------------------------------------------------------------------------------------------------------------------|
| Membership Fee: | <input type="checkbox"/> \$25 Annually for family membership – two members over 16 years (entitled to two votes in club meeting) |
| | <input type="checkbox"/> \$25 Annually for single membership (entitled to one vote in club meeting) |
| | <input type="checkbox"/> \$25 US funds for international membership (if outside of Canada) |
| Payment: | Please make cheque or money order payable to SEOR-NDCC |
| Submit to: | Pam Walton - Membership Chair 207 Crawford Street • Whitby, Ontario • L1N 3S4 |
| | (905) 668-0341 seor.membership@gmail.com |