

SUN COUNTRY TERRIER CLUB
MEMBERSHIP APPLICATION

Name (please print) _____

Address _____ City State Zip _____

Telephone _____ Business _____

E-mail address _____

E-mail newsletter? _____ Yes _____ No Mail Newsletter? _____ Yes _____ No

Kennel Prefix (if any) _____

Are all the applicants over the age of 18? _____ If no, identify junior member(s) _____

Occupation of each adult applying _____

What breeds of terriers do you own? _____

Do you own/breed/exhibit any other breeds? _____

How many litters have you bred in the last three years? _____

Do you exhibit in conformation? _____ Obedience? _____ Field trials? _____ Terrier trials? _____

Do you breed terriers? _____ How many terrier litters have you bred in the last three years? _____

List other dog clubs that you have been a member of and indicate positions held _____

List special abilities and training, other than dog related, that would be an asset to the Club.

WITH THE SUBMISSION OF THIS APPLICATION FOR MEMBRSHIP IN THE SUN COUNTRY TERRIER CLUB, I (WE) THE UNDERSIGNED APPLICANT(S) AGREE TO ABIDE BY THE CONSTITUTION, BYLAWS, AND CODE OF ETHICS OF THE S.C.T.C. AND THE RULES AND REGULATIONS OF THE AMERICAN KENNEL CLUB. I UNDERSTAND THAT SHOULD THIS APPLICATION BE DISAPPROVED, THE S.C.T.C. IS NOT OBLIGATED TO MAKE KNOWN THE REASONS WHY.

Signed _____ Date _____

Sponsors #1 _____ #2 _____

Family Membership (2 voting members) \$25 _____ Individual Membership (1 voting member) \$20 _____
Associate Family Membership \$15 _____ Individual Associate (\$10) _____
Make check payable to SCTC

Read at Board Meeting _____ 1st General Meeting _____ 2nd General Meeting _____

Approved _____ Rejected _____ Date _____