

Scottsbluff Kennel Club

Membership Application

Name(s)

Address

Phone #

E-mail

Breed(s)

Interests: Conformation Obedience Field Agility Other

Membership

Type

Single

Couple

Family

Sponsor:

_____, a member in good standing of the Scottsbluff Kennel Club, I hereby certify that I have submitted the above person(s) for membership; that they have been made aware of the responsibilities of membership; that to the best of my knowledge they have not had their privileges suspended or revoked by the American Kennel Club.

Sponsoring Member's Signature

CLUB USE ONLY		
First Reading:	Approved:	Denied:
Second Reading:	Approved:	Denied:
Effective Date:	Dues	Paid:

Mail To:

Scottsbluff Kennel Club

P.O. Box 1091

Scottsbluff, NE 69363-1091

Club Treasurer