

Return this form to: Ruth Whittey, Membership Coordinator 112-225 13th St E North Vancouver, BC V7L 2L6 Email <u>rwhittey@gmail.com</u> Remit with cheque payable to *The Miniature Dachshund Club of BC*

	NAME:
	TELEPHONE: (Residence) (Business)
	FAX:
	ADDRESS:
ation	E-MAIL: CKC Registration KENNEL NAME: Number
plic	I/We apply for membership in The Miniature Dachshund Club of British Columbia ("MDCBC"). I/We agree to abide by the constitution, the by-laws, and the code of ethics of MDCBC, and by the rules and regulations of the Canadian Kennel Club. I/We understand that all members are listed in the published MDCBC directory, and agree to be listed.
0	Signature:
a	Sponsors: 1
	2(Members who are sponsoring the applicant/s)
	(Members who are sponsoring the applicant/s)
5	Date:
	Type of membership required:
bership	Single Membership\$20.00 (one vote after one year's membership)Family Membership\$30.00 (two votes after one year's membership)
Ď	NOTES: The membership year is the calendar year, i.e. January 1 through December 31.
mem	To help us get to know you, please answer the following questions: 1. Are you an active breeder? Yes No 2. How many Miniature Dachshunds do you own? (adults and puppies) Smooth-haired Long-hairedWire-haired 3. Do you own other dogs? Yes No How many: Breeds (s):
_	 4. Are you a member of the Canadian Kennel Club (CKC)? Yes No 5. Do you belong to any other dog clubs? Yes No 6. Do you hold office in any other dog clubs? Yes No 7. Dog-related activities you are interested in (check all that apply): Conformation Shows Obedience Training and Trials Field Activities/Den Trials Other (please use reverse)

Upon receipt of this form, your application for membership in The Miniature Dachshund Club for BC will be submitted for acceptance by members at the next general meeting.