

Chief Solano Kennel Club Inc. P.O. Box 208

Elmira, CA 95625 chiefsolanokennelclub@gmail.com MEMBERSHIP APPLICATION

Membership dues o	f \$25 must ac	company app	lication.			lt or
Last Name		First Nam	e		Occupation	
Street Address		City			Zip Code	
Home Phone		Cell Phon	e		Email	
Do you classify your	self as a:	Breeder	Exhibitor	Owner		
<u>Breed</u>	Registered	<u>Name</u>	<u> 4</u>	AKC#		<u>Age</u>
What is the reason	for joining Chi	ef Solano Ker	nnel Club?			
What do you intend	to do for the	Club and wha	at do you exp	ect of the (Club?	
Do you plan to activ					Rally () Trackir	ng ()
Have you ever been If so please explain.		y the AKC?	() Yes		() No	

Nama at Club	Location	Membership Current?
lame of Club	Location	Membership Current?
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** Attach separate she	et if more space is needed *	**
Have you been a comm Association(s)? () Yes		of another dog club or animal club or
I sugar the above infor	mation is true and to the he	act of mulinavilodge correct
i swear the above infor	mation is true and to the be	est of my knowledge correct.
Date	Signature	Signature (Guardian)
Sponsored by:		<u>Time Known</u>
1)		
2)		
	es and Articles of Incorpora bers will need to be presen	ntion. In at the meeting when the membership
application is read.	For CSKC us	se only
application is read. Payment Received:		se only
application is read. Payment Received: Date of First Reading: _		se only
application is read. Payment Received: Date of First Reading: _ Date of Second Reading Accepted () or Decline	g: d ()	
application is read. Payment Received: Date of First Reading: _ Date of Second Reading Accepted () or Decline	g:	
Payment Received: Date of First Reading: _ Date of Second Reading Accepted () or Decline	g: d ()	
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