



# YORK COUNTY DOG TRAINING CLUB

## MEMBERSHIP APPLICATION

To apply for membership complete this form and submit it to **Beth Tauser, Membership Chairperson, P O Box 63, Wellsville, PA 17365**, along with your dues payment. Membership dues are \$25.00 per person for Individual, \$40.00 per family for Family, \$15.00 per person for Associate, or \$10.00 per person for Junior.

Type of membership for which you are applying (circle one): **INDIVIDUAL** FAMILY ASSOCIATE JUNIOR

Mr./Mrs./Ms. #1 \_\_\_\_\_ Occupation \_\_\_\_\_

Mr./Mrs./Ms. #2 \_\_\_\_\_ Occupation \_\_\_\_\_

Mr./Mrs./Ms. #3 \_\_\_\_\_ Occupation \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_ How do you want to receive notifications? \_\_\_\_\_  
(Email, U.S. mail?)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Breed of Dogs Owned: \_\_\_\_\_

Titles Earned: \_\_\_\_\_

The YCDTC's objective is to promote cooperation and good sportsmanship among its members in the training and exhibition of dogs. Which dog activity are you most interested in:

- Obedience
- Agility
- Tracking
- Earthdog
- Pet Therapy
- Fly Ball
- Other \_\_\_\_\_

An important part of membership is sharing the responsibility for the ongoing programs and support of the organization. Please indicate the activities which interest you most. Check all that apply.

- Trials
- Matches
- Seminars
- Trophies
- Annual prizes
- Membership
- Fund Raising
- Publicity
- Hospitality
- Training Committee
- Community Service/ Public Education
- Finance/Audit Committee
- Other \_\_\_\_\_

**YCDTC acknowledges the loss of immediate family members of members of our club as well as canine family members. If you wish to have a donation made to a favorite charity, please list that below; otherwise, flowers will be sent.**

Name of Charity: \_\_\_\_\_

By applying for membership in The York County Dog Training Club, I understand and agree to abide by the YCDTC Bylaws and to keep myself in good standing with the American Kennel Club.

Signature of Applicant #1 \_\_\_\_\_ Date \_\_\_\_\_

#2 \_\_\_\_\_ Date \_\_\_\_\_

#3 \_\_\_\_\_ Date \_\_\_\_\_

I verify that I know the above-named applicant(s) and that I endorse their membership in the York County Dog Training Club.

\_\_\_\_\_  
Member

\_\_\_\_\_  
Member

**CLUB USE ONLY:**

Application received: \_\_\_\_\_  
First presentation: \_\_\_\_\_

Check to Treasurer: \_\_\_\_\_  
Second presentation: \_\_\_\_\_