

YORK COUNTY DOG TRAINING CLUB



ANNUAL MEMBERSHIP DUES NOTICE

Please complete and submit this form to **Brenda Landis, Membership Chairperson, 893 Cedars Rd, Lewisberry PA 17339**, along with your dues payment. Checks payable to YCDTC.

**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.**

YCDTC BYLAWS STATE THAT DUES MUST BE PAID by August 1, of the current year. After Aug. 1st a \$10 per month LATE PAYMENT FEE MUST BE ACCOMPANIED WITH YOUR DUES. Failure to do so will result in loss of membership and club privileges AFTER OCTOBER 1st.

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

Mr./Mrs./Ms. _____ Mr./Mrs./Ms. _____

Mr./Mrs./Ms. _____ Mr./Mrs./Ms. _____

Home Phone (____) _____ Cell Phone (____) _____ E-Mail _____

Address _____ City _____ State _____ Zip _____

Breed(s) of Dog(s) 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 activities are you most interested in:

<input type="checkbox"/> Obedience	<input type="checkbox"/> Agility	<input type="checkbox"/> Tracking	<input type="checkbox"/> Earthdog
<input type="checkbox"/> Pet Therapy	<input type="checkbox"/> Fly Ball	<input type="checkbox"/> 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.

<input type="checkbox"/> Trials	<input type="checkbox"/> Matches	<input type="checkbox"/> Seminars	<input type="checkbox"/> Trophies
<input type="checkbox"/> Annual Prizes	<input type="checkbox"/> Membership	<input type="checkbox"/> Fund Raising	<input type="checkbox"/> Publicity
<input type="checkbox"/> Hospitality	<input type="checkbox"/> Training Committee	<input type="checkbox"/> Community Service / Public Education	<input type="checkbox"/> 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 _____

I understand and agree to abide by the YCDTC Bylaws and to keep myself in good standing with the American Kennel Club.

Signature of Member # 1 _____ Date _____

Signature of Member # 2 _____ Date _____

Signature of Member # 3 _____ Date _____

CLUB USE ONLY:	
RENEWAL RECEIVED _____	CHECK TO TREASURER _____