



BAY DE NOC KENNEL CLUB

NEW Membership Application

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Alternate: _____

Email Address: _____

Emergency

Contact

Information: _____

Breed of Dogs: _____

Three types of memberships, you must attend one meeting prior to being voted in as a member. Rates are for NEW membership.

_____ Gold Member - \$30 single (one adult and any children under 18)
\$35 household (two adults and any children under 18)
15 work hours per adult plus cleaning rotation

_____ Basic Member - \$40 single (one adult and any children under 18)
\$45 household (two adults and any children under 18)

_____ Junior Member – \$15 (under 18 years of age)

By signing this form you have read, understand, and agree to the requirements for the membership type you have chosen and will not share the code to the building with anyone.

Applicant's Signature: _____

Date: _____

My interests are (circle):

Agility

Obedience

Rally

Conformation

Nosework

Barn Hunt

Therapy Dog

Freestyle

Hunting

Tracking

Lure Coursing

Weight Pull

Other:

Make your check out to: **Bay DeNoc Kennel Club**

Please send your check and completed form to:

Tracee Horn

220 Youngs Rd

Gwinn, MI 49841

Questions? Email Tracee at tmhorn@chartermi.net