

BAY DE NOC KENNEL CLUB

NEW Membership Application

Name:			
Address:			
City, State, Zip:			
Phone:	none: <u>Alternate</u>		
	<u>i</u>		
Email Address:			
Emergency			
Contact			
Information:			
Breed of Dogs:			
		st attend one meeting pr are for NEW membersh	_
Gold Member - \$30 single (one adult and any children under 18) 15 hours plus cleaning rotation			
	,	(two adults and any chile	dren under 18)
	30 hours plus cl	eaning rotation	
Basic Memb	• ,	adult and any children (two adults and any chil	•
Junior Memb	per – \$15 (under 18 <u>y</u>		ŕ
	=	iderstand, and agree to n and will not share the	-
Applicant's Signate	ure:		
My interests are (c	rircle):		
Agility	Obedience	Rally	Conformation
Nosework	Barn Hunt	Therapy Dog	Freestyle
Hunting	Tracking	Lure Coursing	Weight Pull
Other:	_		
	out to: Bay DeNoc I		
0.5	_	ed form to the next BDN	
	-	ck the website for any c	han <mark>ges.</mark>
Ouestions? Email 7	Tracee at tmhorn@ e	rmail.com	