



WHITE RIVER GOLDEN RETRIEVER CLUB, INC.
Membership Application

Date _____

Single Membership \$25.00

Family Membership \$40.00

Membership year: January 1st through December 31st.

(Applications after June 30 – pay ½ dues until December 31.)

I (we) hereby apply for membership in the White River Golden Retriever Club, Inc. Members hereby agree to abide by the Constitution and By-Laws of White River Golden Retriever Club, Inc. and the American Kennel Club.

Name(s) _____

Address _____ City _____ Zip _____

State _____ Email _____

Telephone _____ Cell _____

Occupation _____ Spouse's Occupation _____

List names of children in your family _____

Are you a member of the Golden Retriever Club of America? _____

List below the Registered Names and any titles earned on your current Golden(s)

1. _____

2. _____

3. _____

4. _____

Do you exhibit your dogs in AKC sanctioned events? (Bench, Field, Obedience) Please state which.

Applicant Signature

Applicant Signature

Endorsed by: (AKC requires two endorsements)

Member Signature

Member Signature

Please complete the reverse side of this form.

Are you involved in dog breeding? _____

If yes, please explain.

Do you own, operate or assist in any type of : Dog Training _____

If yes please explain _____

Boarding Kennel _____ Grooming Shop _____

Do you have other breeds of dogs? _____ Please list them.

Do you belong to any other dog related organizations? If so please explain.

What is your main interest in Golden Retrievers?

Obedience _____ Field _____ Conformation _____ Hunting _____ Tracking _____

Pet _____ Pet Therapy _____ Other _____

Are you an AKC Licensed Judge? _____ If yes, please list _____

Which of these club activities would you be willing to volunteer ?

Awards _____ Specialty _____ WC/WCX _____ TDX/VST _____ Programs _____

Newsletter _____ Programs _____

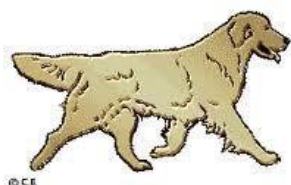
Please describe other interests or talents that would be helpful to the club.

To be eligible for membership, you must attend two meetings in a twelve month period.

Please indicate dates of meetings you have attended. #1 _____ #2 _____

(Please do not mail until you have attended the required 2 meetings.)

Please mail your check for dues along with your application to:



Jim Peterson
1817 Arcadia Dr
Lafayette, IN 47905