

CHESAPEAKE VA DOG FANCIERS ASSOCIATION



APPLICATION FOR MEMBERSHIP

Last Name _____ First Name _____

Street Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

E-MAIL ADDRESS _____

OCCUPATION(S) _____

I (We) are interested in the following activities: (Circle all that apply)

Confirmation Obedience Tracking Herding Agility Breeding Grooming
General Knowledge Junior Showmanship Pet Therapy Other _____

Would you like to participate in a mentoring program as a mentor or to be mentored?

Please list below the following information about each dog you own:

Name Age Do you exhibit or compete, what activity?

1. _____

2. _____

3. _____

4. _____

I (We) agree to abide by the CVDFFA Constitution and By-laws and the rules of the American Kennel Club.

Signature _____ Date _____

Applicant proposed by two (2) CVDFFA members in good standing whose signatures are below:

SPONSORS: 1. _____ 2. _____
Signature Date Signature Date

Please answer the questions below that are applicable. They are intended to help us get to know you better and to determine how best the Club can help you.

Your family consists of (children, pets, etc.)

Your family's interest (hobbies, sports, etc.)

Membership in other dog clubs:

Experience (current and past)

Have you received help from the breeder(s) of your dog(s)? YES NO

Type of help

In what areas would you like CVDFFA to help you with your "doggie" problems?

Do you have any particular talents that might be utilized by CVDFFA? _____

As a member in good standing, we require that you volunteer time at various events that are hosted by the club. Please state what activities you would be interested in volunteering for and/or learning about:

Annual AKC Dog Show _____

AKC Sanctioned Match _____

Handling Classes _____

Hospitality _____

Speakers for meetings _____

Public awareness programs _____

Membership Committee _____

Other comments _____

Dues are payable by check or money order payable to CVDFFA. (individual \$20)