** MEMBERSHIP**

Amt Pd:\_\_\_\_\_\_\_\_\_\_\_

Initiation Fee Pd.

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_

**APPLICATION**

**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TELEPHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Be sure to include Area Code**

**E-Mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SPOUSES NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OCCUPATIONS(S) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOBBIES &/0R PERSONAL SKILLS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OTHER CLUB AFFILIATIONS, OFFICES HELD, ETC. \_\_\_\_\_\_\_\_\_\_\_**

**NUMBER OF SIBERIAN HUSKIES OWNED/CO-OWNED \_\_\_\_\_\_\_\_**

**MALES\_\_\_\_\_\_\_ FEMALES \_\_\_\_\_\_\_**

**AKC REGISTRATION NUMBER OR LITTER NUMBER \_\_\_\_\_\_\_\_\_\_**

**INTEREST AREAS: OBEDIENCE\_\_\_\_; CONFORMATION \_\_\_\_\_;**

**SLEDDING \_\_\_\_\_\_; AGILITY \_\_\_\_\_\_HEALTH AREAS \_\_\_\_\_**

**GOOD CITIZEN\_\_\_\_\_; THERAPY DOG \_\_\_\_\_RESCUE\_\_\_\_\_**

**PET \_\_\_ ;GENERAL \_\_\_\_; ALL OF THE ABOVE \_\_\_\_**

***(PLEASE Continue on the other side!)***

**The Applicant(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Hereby, by signing this form, agree to abide by the Constitution**

**and By-Laws and the Code of Ethics of the *SIBERIAN HUSKY***

***CLUB OF GREATER CLEVELAND, INC*, and the rules of the**

***American Kennel Club.***

***Membership Dues for 1(one) year are $18.00 per person***

***Or $27.00 per couple, with an initiation fee of $5.00 per person.***

**SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Please print name here - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SPOUSE SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Please print here - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ENDORSED/SPONSORED BY (1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ENDORSED/SPONSORED BY (2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Received by Secretary \_\_\_\_\_\_\_\_\_\_\_\_**

**First Reading to Membership\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Acted upon by Membership\_\_\_\_\_\_\_\_\_**

**Action of Membership \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***APPLICANT MUST ATTEND AT LEAST TWO MEETINGS ,***

***OR HAVE PARTICIPATED IN TWO CLUB ACTIVITIES, PRIOR TO***

***BEING VOTED UPON.***

**For more information about joining SHCGC**

**Contact:**

stevendudek@sbcglobal.net