

Date Membership Approved

NRKC (REV 2020)

NOLAN RIVER KENNEL CLUB, INC.

Licensed by the American Kennel Club

Please return completed application and check for membership to:

Kathleen Brennan - 6001 Springwood Dr. - Arlington, TX 76001

MEMBERSHIP APPLICATION FORM

I/we hereby make application for membership in the Nolan River Kennel Club. If accepted by the membership, I/we agree to abide by the constitution and bylaws of the

This form is capable of completion on a computer. Be sure and "Save" before you forward or it will be

blank. Send to: kb76001@yahoo.com (send the

"saved" version. Thank you!

Club and the rules of the American Kennel Club and to conscientiously promote the best interest of purebred dogs to the best of my/our ability. I/we clearly understand that memberships are based on a current calendar year basis and that I/we shall be entitled to the full rights and privileges for that period. Further, I/we understand that dues are due and payable on January 1 of each calendar year.

DATE OF APPLICATION: ____ MAKE ALL CHECKS PAYABLE TO: NOLAN RIVER KENNEL CLUB SINGLE MEMBERSHIP \$ 7.50 CLUB DUES COUPLES (Two members same household) MEMBERSHIP \$10.00 DUES CAN BE PAID ON-LINE AT: http://www.nolanriverkennelclub.com (a Paypal fee is added to all on-line payments) Optional: Birthday Month Day PLEASE PRINT OR TYPE Mr. ____ Mrs. ___ Ms. ___ Mr. & Mrs. ___ Anniversary Month Day Name(s) Address (including zip code) City & State Street Occupation _____ Phone Email Breed of Dog(s) owned Do you show in Conformation? Performance Events (If so, which ones)? Do you currently own any Champions? Performance Events Titleholders? Have you bred any litters during the past year? Do you sell dogs to pet shops or commercial deals for resale? Are you now or have you ever been suspended by the American Kennel Club?

If so, for what reason and for how long? (List dates) Names of other dog clubs to which you currently belong: Offices held in other dog clubs (currently or in past years)? How many years have you been a fancier? ____ Are you licensed judge? ___ Hobbies outside of dogs Experience in Public, Community or Charitable Organizations In which phase of Club work would you volunteer to help? Applicant Signature Spouse Signature Spouse Signature Your signature attests that all of the above information is accurate and true to the best of your knowledge. New Applicant(s) must be Approved by: Two (2) Members, unrelated and not residing in the same household, MUST sign Signature Signature Please Print Name Please Print Name