



P.O. Box 990937, Redding, CA 96099-0937

**530-224-7724**

[www.norcaldogclub.com](http://www.norcaldogclub.com)

**Club Membership Application**

Name: \_\_\_\_\_ Spouse / Other: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Child(ren): \_\_\_\_\_

Breed(s) of Dog(s) & Names: \_\_\_\_\_

1. Have you belonged to other dog clubs? `` Yes `` No If yes: Name(s) of Club(s) and addresses:

\_\_\_\_\_

2. Have you completed (including participation in graduation exercises) a course with the Northern California Dog Training Club or another Trainer? `` Yes `` No If so, date(s)? \_\_\_\_\_

Type/Level of course(s)? \_\_\_\_\_ Name of Instructor(s)? \_\_\_\_\_

3. Have you trained and shown a dog to a title? `` Yes `` No If so, date(s)? \_\_\_\_\_

Title(s) earned: \_\_\_\_\_

4. On request of the Board of Directors, will you be willing to demonstrate your dog training skills to a panel of instructors? `` Yes `` No

Membership requires qualification by at least one of the above. Annual dues must accompany this application. When the application is approved, you will receive a copy of By-Laws and Policies. Approval requires a favorable recommendation by the Board Directors and acceptance by the General Membership.

I understand membership requires work at classes and on other projects. I also agree to act in the best interests of the Club at all times in which I may be representing the Club. I agree I will not hold the Northern California Dog Training Club responsible for any injuries or accidents that may occur while I am a member of this Club.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

***Do not write below this line – For NCDTC use***

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Date Approved/Not Approved: \_\_\_\_\_ `` By-laws sent; Date Sent: \_\_\_\_\_

Board Secretary's Signature: \_\_\_\_\_

