



GARDEN STATE GOLDEN RETRIEVER CLUB, INC

APPLICATION FOR MEMBERSHIP

Name(s) _____ Date _____

Mailing Address _____

Kennel Name (if any) _____

Email _____ Phone _____

Are you in good standing with the AKC? _____ Do you belong to any other dog clubs? _____

If yes, please list the clubs and any volunteer service you've given (e.g., assisted at events, served as an officer, etc.)

Number of Goldens currently owned? _____ Number of years with Goldens? _____

Other breeds? Which one(s)? _____

Activities/Interests:

- | | | | |
|------------------------------------------|-------------------------------------|--------------------------------------------------|----------------------------------------|
| <input type="checkbox"/> Conformation | <input type="checkbox"/> Obedience | <input type="checkbox"/> Field | <input type="checkbox"/> Boarding |
| <input type="checkbox"/> Breeding | <input type="checkbox"/> Rally | <input type="checkbox"/> Therapy Dog | <input type="checkbox"/> Grooming |
| <input type="checkbox"/> Judging (what?) | <input type="checkbox"/> Agility | <input type="checkbox"/> SAR (Search and Rescue) | <input type="checkbox"/> Other (what?) |
| <input type="checkbox"/> Tracking | <input type="checkbox"/> Family Pet | <input type="checkbox"/> Nose Work | |

Why do you want to join the Garden State Golden Retriever Club?

Please fill in all the information above and bring your application to any GSGRC event or email it to the address below. Our membership chair or any club officer can provide you with a copy of our Constitution and By-Laws, (also found on our website www.gsgrc.org) and introduce you to your sponsors.

I (we) hereby apply for membership in the Garden State Golden Retriever Club, Inc. and hereby certify that the above statements are true, and 1) that I (we) have received a copy of and agree to abide by its Constitution, By-laws, Principles, Responsibilities and Guidelines, and rules and regulations if elected and agree 2) to have my (our) name(s) published to the membership.

Please enclose your annual dues of \$40.00 for Family Membership or \$30.00 for Single Membership with this application.

Signature of Applicant(s)

Signature of Sponsors (Sponsors may not be related to each other.)

1) _____

2) _____

Please note that all applicants must have attended at least one event before applying for membership. Accordingly, please list the dates of the event(s) you have attended:

Questions? Please contact:

Barbara Reichman
1821 Painted Horse Drive
Indian Trail, NC 28079
barbreichman@comcast.net

Date Received _____ Notified _____

Board Approved _____ Date Published _____

Club Approved _____ Treas. Notified _____

Newsletter Editor Notified _____