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| APPLICATION FOR MEMBERSHIP | | | |
| (Mr/Mrs/Miss/Ms) Last name: |  | First Name: | . |
| (Mr/Mrs/Miss/Ms) Last name: |  | First Name: | . |
| Address: |  |  | . |
| City: | Prov: | Postal Code: | . |
| Phone #: | Alternate Phone/Fax | | . |
| Email: | Website: | | . |
| Kennel Name: | Registered? Yes/No | |  |
| Brief Bio: |  |  | . |
| . | | | |
| . | | | |
| The best way to contact me is by (check one) ***☐*** Phone | | * Email ***☐*** Postal Mail |  |

I/We wish to be members of the Chinese Crested Club of Canada (please Check one)

|  |  |
| --- | --- |
| Full Member: | . |
| Associate Member: | . |
| Sponsor #1 : | . |
| Sponsor #2 : | . |
| OR I wish to renew my membership | . |

Membership Dues:

Full membership: $20/year, 1 vote only.

Full Family membership: $25/year, limited to 2 people with the same residence, 2 votes. Associate membership: $15/year, restricted to non-resident of Canada. No voting privileges.

I/We, the undersigned, have read, understood, accepted and agree to abide by the Constitution and by-laws of the Chinese Crested Club of Canada and the Canadian Kennel Club.

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| Date: | . |  |
| Signature: | . |  |
| Amount Enclosed: $ | Payment to be made once membership approved |  |
|  | | |
|  | | |
| **Mail completed application to:** |  |  |
| CHINESE CRESTED CLUB OF CANADA | For Office Use Only |  |
| Date Received: | . |
| c\o Lesley Thomas (Secretary) |
| Received by: | . |
| 90 Royal Ridge Manor  NW,  Calgary,  AB    T3G 0A2 |
| New Member/Renew | |
| [Secretary@chinesecrestedclubcanada.com](mailto:Secretary@chinesecrestedclubcanada.com) |
| Amount received: $ | . |
| **PayPal or e-transfer to:**  [Treasurer@chinesecrestedclubcanada.com](mailto:Treasurer@chinesecrestedclubcanada.com) |  |  |