

|  |
| --- |
| 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.

|  |  |  |
| --- | --- | --- |
| 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  |
| Amount received: $  | . |
| **PayPal or e-transfer to:**Treasurer@chinesecrestedclubcanada.com  |  |  |