

## ATLANTIC LABRADOR RETRIEVER CLUB APPLICATION FOR MEMBERSHIP

NAME(S):			
ADDRESS:			
TELEPHONE: (RES)	(BUS)	E-	MAIL
KENNEL NAME:	TATTOO:		
PLEASE LIST LOCAL/NATIONA	AL LABRADOR OR RETRIEV	VER CLUBS THAT YO	OU BELONG TO:
CKC MEMBERSHIP #	WHEN DID YO	OU GET YOUR FIRST	LAB?
WOULD YOU BE INTERESTED	IN BEING LISTED ON OU	R WEBSITE? If yes, co	omplete the back of this form. [] NO
WHAT SPECIAL INTERESTS DO	O YOU HAVE IN THE BREE	ED?	
Show (Conformation)	Obedience	Breeding	Home Companion
Working Tests	Field Tests	Hunting	Other
ALRC MEMBER WHO IS SPON	ISORING YOU:		
Member Signature:			
SECOND ALRC MEMBER SPO			
Member Signature:			
Applicant Signature:		Date	::
MEMBERSHIP FEES: Please C	heck One		
Regular Membership (1 bulletin	, 1 vote), (\$20.00)	\$	
Regular Household Membership	o (1 bulletin, 2 votes), (\$25.		
Regular Life Membership (1 bull	etin, 1 vote), (no charge)*	\$	
Honorary Membership (1 bullet	in, no votes), (no charge)	\$	
* certain conditions may apply			

PLEASE FORWARD TO: info@alrc.ca

## PLEASE DO NOT SEND CASH. PAYMENT CAN BE MADE BY PAYPAL PLEASE MAKE CHEQUES/MONEY ORDERS PAYABLE TO THE ALRC

Cheques can be sent to Karen Doucette at doukarelabradors@yahoo.ca

<u>Disclaimer:</u> Cheques received for membership applications will be cashed upon receipt. This does not constitute membership into the club. Approval processes will be followed; in the event your application is not approved a full refund will be issued.