

GLKCM

(Great Lakes Keeshond Club of Michigan)

MEMBERSHIP APPLICATION

FULL NAME: _____

FULL NAME: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____ ZIP/PC: _____

PHONE: _____ EMAIL: _____

I/we wish to apply for membership to the Great Lakes Keeshond Club of Michigan (GLKCM). I/we understand that the goals of this Club are to promote the Keeshond breed, associate with other Keeshond owners and work toward AKC sanctioning. The GLKCM is open to all Keeshond owners, including breeders, exhibitors (all venues), and pet owners. All members are encouraged to participate in all club activities and events. I/we agree to abide by the Code of Ethics, Constitution and By-Laws of the GLKCM, as well as the rules and regulations of the American Kennel Club.

Please answer all that apply:

1. How many Keeshonden do you currently own? Male: _____ Female: _____

2. Do you show in Conformation? Yes _____ No _____

3. Do you show in Obedience/Rally? Yes _____ No _____

4. Do you show in Agility? Yes _____ No _____

5. Do you participate in any other venue (Please specify): _____

6. Have you ever bred a litter of Keeshonden? Yes _____ No _____

If yes, how many litters _____ and year of first litter _____.

7. Do you have a Kennel name? Yes (please provide name) _____ No _____

8. Do you own and/or show any other breeds? Yes _____ No _____

9. Do you belong to any other dog clubs? Yes _____ No _____

If yes, please list: _____

10. Have you ever been suspended or declined membership by the American Kennel Club, or any other dog club? Yes _____ No _____

If yes, please briefly describe: _____

11. Are you interested in serving on one of the GLKCM Committees? Yes _____ No _____

Please sign this application and return with membership fees to the Membership Coordinator:

Annual Dues:

Single	\$15.00
Family	\$20.00

Date: _____

Applicant's Signature: _____

Applicant's Signature: _____

Sponsor's Name: _____

Sponsor's Signature: _____