

MEMBERSHIP APPLICATION OLD DOMINION PUG CLUB, INC

Date _____

Name _____

Address _____

City _____ State _____ Zip _____

Occupation _____ Phone(S) _____

E-Mail _____

Pug Information:

Owner _____ Breeder _____ How Long _____

Conformation _____ Obedience _____ Agility _____ Other _____

Approximately how many litters do you breed per year _____? Kennel Name _____

Why are you interested in joining the Old Dominion Pug Club?

Are you willing to serve the club by working on committees or participating in club functions? _____

List other breed or specialty clubs to which you belong: _____

Are you willing to subscribe to the code of ethics in our by-laws? _____

I/We do apply for membership in the Old Dominion Pug Club. I/We have read and agree to abide by the Constitution, By-laws, Standing Rules, and Regulations, and those of the American Kennel Club. I/We accept the Code of Ethics and agree to abide by those guidelines.

Applicants

Signature _____

Sponsors

Signatures _____