



# Membership Application

\_\_\_\_\_ Date

Name (s) \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

E-Mail \_\_\_\_\_

**Type of membership Requested**       **Individual**      Dues \$15  
 **Family**      Dues \$22.50

**Do You Own Bulldogs?**     Yes  No If Yes, How many and for how long?

**Do you own other breeds?**     Yes  No If yes, which breeds and how many?

**Do you belong to other Bulldog Clubs or Kennel Clubs?**     Yes  No If Yes, which ones?

**Have you even been convicted of animal abuse or cruelty?**  Yes  No If yes, please explain.

**Are you now or have you ever been suspended from privileges by the AKC?**     Yes  NO If Yes, Please explain.

**I am interested in (check all that apply):**

Learning about:      Bulldogs \_\_\_\_      Health Care \_\_\_\_      Grooming \_\_\_\_      Canine Good Citizenship \_\_\_\_\_

Training dogs for:    Good pets \_\_\_\_      Show Handling \_\_\_\_      Obedience \_\_\_\_      Helping at shows \_\_\_\_      Helping Rescue \_\_\_\_

Assisting Hospitality at meetings or shows \_\_\_\_      (List other interests) \_\_\_\_\_

**I agree to abide by the Constitution and By-Laws of the Bulldog Club of New Jersey and by the Rules and Regulations of the American Kennel Club.**

Your Signature(s) \_\_\_\_\_

Name(s) of members proposing membership \_\_\_\_\_

Signature(s) of members proposing membership \_\_\_\_\_

Please send the completed form and your dues check to: **Dorothy Prager, Secretary, 7552 Stein Road, Zionsville, PA 18092-2920**

Date of 1st Reading \_\_\_\_\_

Date of 2nd Reading \_\_\_\_\_

Approved

Disapproved