## Carroll Kennel Club, Inc. PO 2028 Westminster Md 21158-9028

I hereby make application for membership in the Carroll Kennel Club, Inc.\*  $\,$ 

NAME:	
ADDRESS:	
Home Phone Number:	Cell Phone Number:
Best way(s) to reach me:text	home phone email cell phone
	long to and position(s) held:
Breed of Dog(s) owned:	
Competitions I participate in: (eg. co	onformation, agility, etc.)
I wish to participate or assist in the fo	following club programs:  Participate Assist/Lead
Agility Conformation Handling Dock Diving Fast CAT Show	
I agree to abide by the Carroll Kenne the American Kennel Club.	el Club, Inc. constitutions and its bylaws and the rules of
Signature of Applicant:	
	2)

Please see directions on page 2.

<sup>\*</sup> Each household member applicant should complete a separate Application Form.

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## Please complete the following

What is your T shirt size?
Please check the type of membership desired and submit the appropriate payment with
this application. Checks should be made out to Carroll Kennel Club.
One Person \$20
Household (2 or more persons at one address) \$35
Junior (Under 18 years of age) No Charge.

Send the competed Membership Application, signed by two CKC club members (sponsors) with payment to:

Treasurer

Carroll Kennel Club, Inc.

P.O. Box 2028

Westminster, MD 21158

Form revised 1-15-21