

Membership Application

Application Date _____

Name:	
Address (street, city, zip code):	
Home Phone:	Mobile Phone:
Email:	Occupation:
How many dogs do you own? What breed(s)?	
Have you attended any dog training classes? If yes, where?	
	dog(s)? If yes, what titles?
Do you belong to any other dog clubs? If so, which ones:	
Why do you wish to join the Club?	
How are you interested in helping the Club?	
This application must be endorsed by two regular members in good standing with ACT.	
Endorsed by: 1.	2
Membership eligibility requirements in the ACT Bylaws: Before being approved for ACT membership, an applicant must meet one or more of the following criteria.	
 Has enrolled in and attended two 6-week meetings of the Club. 	classes and has attended two monthly general membership
 Has demonstrated an active interest in dog training, including, but not limited to, exhibits, trials, Sanctioned Matches, non-sanctioned fun matches, dog sport events, and breed club activities; and has attended two monthly general membership meetings of the Club. 	
Holds a Junior membership.	
The application process begins on the date of the first general membership meeting attended. An applicant must attend a third meeting no later than 6 months from that date.	
Club to the best of my abilities. I understand	o abide by the ACT Bylaws and the rules of the American Kennel that ACT membership becomes effective upon payment of dues on fees are payable within 30 days of being voted in as a
Signed:	Date: