



Walla Walla Kennel Club
P.O. Box 157
Walla Walla, WA 99362
wwkc.org

Application For Membership

Name(s) _____

Address _____

Phone: _____ Cell: _____ Email address: _____

Type of Membership applied for:

Individual _____

Family _____

Junior _____

Breed Interests: _____

Areas of Dog Activities or interests: (e.g. Conformation, Obedience) _____

Are you willing to serve the club in some way? Yes _____ No _____

If yes, please indicate areas in which you would be willing to participate or tell us of any special talents you have _____

I (We) hereby declare that I am (we are) in good standing with the AKC and agree to abide by their rules and by the Constitution and Bylaws of the Walla Walla Kennel Club, Inc.

Dated: _____ Signed: _____

Dated: _____ Signed: _____

An Individual Junior Member must have the signature of a Guardian who will agree to the membership clauses:

Dated: _____ Signed: _____

Attendance at one WWKC Meeting is mandatory before membership will be approved.

Return this completed application form with the required dues attached to the above address.

(Individual Membership is \$10.00 per year) (Family Membership is \$15.00 per year)

(Junior Membership is \$10.00 per year)

_____ Do Not Write Below Line _____

Date Received: _____ Date Meeting Attended _____

Board Action: _____

WWKC Approval: _____