

Walla Walla Kennel Club Membership Renewal PO Box 157 Walla Walla, WA 99362 Application For Membership

Name(s)	
Address	
Phone:(cell number will not be sha	Cell:ared with non-members or appear on the web site)
Email address:	
Type of Membership	Family \$25.00 Junior\$ 10.00
Breed Interests:	
Areas of Dog Activities or i	nterests: (e.g. Conformation, Obedience)
Are you willing to serve the If yes, please indicate area you have:	e club in some way? Yes No is in which you would be willing to participate or tell us of any special talents
and by the Constitution an authorize the Club to notify and to hold the WALLA WA	I am (we are) in good standing with the AKC and agree to abide by their rules d Bylaws of the Walla Walla Kennel Club, Inc. In signing this application, I also me of Club business through the various electronic means such as e-mail, ALLA KENNEL CLUB harmless should these notifications not be received eans. I also have the option of requesting notification of club business through
Dated:	Signed:
Dated: An Individual Junior Memb clauses:	Signed:er must have the signature of a Guardian who will agree to the membership
Dated:	Signed:C Meeting is mandatory before membership will be approved.
Attendance at one WWK	Meeting is mandatory before membership will be approved.
Return this completed app	lication form with the required dues attached to the above address.
Dc	Not Write Below Line
Date Received:	Date Meeting Attended
Board Action:	
WWKC Approval:	