



Michigan Chesapeake Bay Retriever Club
Membership Application

Applicant Name \_\_\_\_\_ Occupation \_\_\_\_\_
Email \_\_\_\_\_ Phone \_\_\_\_\_
2nd Applicant Name \_\_\_\_\_ Occupation \_\_\_\_\_
Email \_\_\_\_\_ Phone \_\_\_\_\_
Address \_\_\_\_\_ City \_\_\_\_\_
State \_\_\_\_\_ Zip \_\_\_\_\_ Website \_\_\_\_\_

Members agree to abide by the Constitution/By-Laws of the MCBRC and rules of the AKC. Members are required to attend at least 1 Membership Meeting per year. Non-attendance will incur a \$25 penalty fee.

Please Sign your application and check "Yes" or "No" in response to the following Email Communications Authorization statement: I AUTHORIZE MCBRC TO SEND CLUB COMMUNICATIONS TO ME BY EMAIL

Applicant Signature 1 \_\_\_\_\_ Yes \_\_\_ No \_\_\_
Applicant Signature 2 \_\_\_\_\_ Yes \_\_\_ No \_\_\_

Endorsement of two MCBRC Members in good standing are REQUIRED

1 \_\_\_\_\_ 2 \_\_\_\_\_

Please check Type of Membership you are applying for and enclose appropriate dues:

- Individual Membership - \$25 yr. For persons at least 18 years of age, with all rights and privileges of membership, including voting privileges and the right to hold office.
Household/Dual Membership - \$30 yr. Shall comprise two Adult members of the same household meeting the qualifications for individual membership, both individuals shall be entitled to all rights and privileges of membership, including voting privileges and the right to hold office.
Associate Membership - \$15 yr. For persons under 18 years of age, shall be entitled to all privileges of membership, except the right to vote or hold office. Associate Members will not be able to participate at special membership rates in Club functions nor will they be eligible for special Club awards. Date of Birth (mm/yyyy)\_\_\_\_\_

Please check all that apply to you: Agility \_\_\_ Exhibitor \_\_\_ Judge \_\_\_ Breeder \_\_\_ Dog Owner
Field Trial \_\_\_ Hunt Test \_\_\_ Obedience \_\_\_ Hunting \_\_\_ Tracking \_\_\_ Other \_\_\_\_\_

How did you hear about the MCBRC? Website \_\_\_ From a Club Member \_\_\_ Other \_\_\_\_\_

Membership Dues \$ \_\_\_\_\_ Total Enclosed \$ \_\_\_\_\_

Make checks payable to MCBRC (U.S. Funds only)
Mail to: MCBRC c/o Dorene Irish - 10082 N. Vassar, Mt. Morris, MI 48458

For Club Use Only: Signature of President: \_\_\_\_\_ Date: \_\_\_\_\_