



Greater St. Louis
**Shetland
Sheepdog**
Club

Member Application

I hereby make application for membership in the Greater St. Louis Shetland Sheepdog Club. If accepted by the membership, I agree to abide by their constitution and by-laws, the rules of the American Kennel Club, American Shetland Sheepdog Association and to conscientiously promote the best interest of Shetland Sheepdogs to the best of my abilities.

I clearly understand that memberships are based on the Club's Fiscal Year basis, and that dues are due and payable at the beginning of the fiscal year. Dues are payable at the time of application.

Make checks payable to: Greater St. Louis Shetland Sheepdog Club

QUESTIONS

Type of membership applied for:

Associate Membership _____ Dues Owed: _____

Full Membership _____ Dues Owed: _____

Please place an "X" in the respective membership type.

PLEASE PRINT:

Name: _____

Address: _____

City, State Zip: _____

Telephone: _____

Email _____

Questionnaire must be completed before application can be processed.

1. Why are you interested in joining the Greater St. Louis Shetland Sheepdog Club

2. Number of years in Shetland Sheepdogs:

3. Number of Shetland Sheepdogs you own or co-own?

4. Do you consider yourself:

Place an "X" in the respective box.

☐ Pet Owner ☐ Novice Exhibitor ☐ Experienced Exhibitor ☐ Breeder

5. Past or current membership in dog clubs:

6. Other hobbies or interests:

7. In which phase of work would you volunteer to help this Club?

Hospitality: ☐

Match/Seminar Committees ☐

Advertising: ☐

Transportation / Set-UP ☐

Photography: ☐

Rescue: ☐

Newsletter: ☐

Other: _____

8. Do you sell to pet shops or commercial dealers for resale

If applying for Full Membership, you must have attended 2 meetings

Applicant's Signature _____

Date: _____

SPONSORS #1

Sponsor #1 _____

Date: _____

I have been to the Applicant's residence: (Initials) _____

I have not been to the Applicant's residence: (Initials) _____

SPONSORS #2

Sponsor #2 _____

Date: _____

I have been to the Applicant's residence: (Initials) _____

I have not been to the Applicant's residence: (Initials) _____

For application to Full Membership, both sponsors must be Full Members and one of them must visit your home/kennel.

For application to Associate Membership, sponsor must be full member.

MAIL COMPLETED APPLICATIONS TO MEMBERSHIP CHAIRPERSON: