

## **Hudson Valley Golden Retriever Club Membership Application**

Please complete this form and sign and mail along with your check payable to HVGRC for \$30.00 Single Membership, \$35 per Family or \$10 Junior to: Membership Chairman, Lisa Weinberg, 18 Florence Drive, Mahopac, NY 10541

Name:		
Address:		
	State:	
Home Phone:	Work or Cell Phone:	
E-Mail		
Please check all the	nat apply: Pet OwnerExhibitorBreeder Kennel Name (Optional)	
Check your areas of in	nterest: ConformationObedienceRally Event TrackingOther	sBreedingAgilityField
Agility Trial, Field Even	wing HVGRC events or positions that you would b ts, Health Clinic, Match Show, Fund Raising, Meet oard of Directors Position/Officer, Newsletter, Mai	ing Hospitality, Programs, Education,
What are your reasons for joi	ning HVGRC?	
How did you find out about I	HVGRC?	
I agree to uphold the Constitute affirm that I am not currently pending by the American Ker		Hudson Valley Golden Retriever Club. It or are any charges known by me to be
Signature of Applicant:		Date
Sponsorship by two HVGRC	members in good standing is required.	
Sponsor	Sponser	
Attendance at two meetings i application.	s required for Membership. This requirement must	be completed within one year of
Meeting #1 - Date_ Upon completion of the abov	Meeting #2 - Date_	
	n at the following General Meeting.	
Please refer to the HVGRC w	vebsite: <u>www.HVGRC.org</u> for further details conc	erning membership.
	(For HVGRC Use Only)	
Date of Application	Date of presentation to Membership	Date of Acceptance