

Port Arthur Retriever Club

Application for Membership

Date: _____

Name: (Last) _____ (First) _____ (Middle) _____

Spouse's Name: _____

Home Address: Street or P.O. _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Preferred Phone Number: _____

Age: _____ Occupation: _____ DL#: _____

Indicate Activities of Most Interest:

Hunt Test: _____ Field Trials: _____ Training: _____ Seminars: _____

Please give a brief description of what your main objectives are for joining this club. How do you expect to contribute to the club? What do you expect to gain from your membership?

If you have previously been a member, what year? _____

List of Dogs you currently own:

Name	Breed	Sex	Color
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other Hobbies or Interests: _____

I understand PARC members are expected to volunteer as workers at Field Trials and Hunt Tests sponsored by PARC. Please Initial: _____

If accepted as a member, I agree to abide by the constitution and by-laws of the Port Arthur Retriever Club, the rules of the American Kennel Club, and all provisions of the club's leased property.

Applicant Signature - Date

Endorsing Member Signature - Date