



MEMBERSHIP APPLICATION

Name(s) _____
 Kennel Name _____
 Address _____
 City _____ State _____
 Zip _____ Phone _____
 E-Mail address: _____
 Occupation(s) _____
 Family members _____
 Other dog memberships _____
 NCA member? Yes No

Reasons for joining SCNC _____

Will you become actively involved in SCNC? _____

Are you currently in good standing with the American Kennel Club and with the Newfoundland Club of America? Yes No

(NOTE: Membership in the American Kennel Club and/or the Newfoundland Club of America is not required for membership in South Central Newfoundland Club.)

Interests you hope to further in the SCNC (circle all that apply):

- | | | | |
|--------------|-----------------|--------------|-----------------------|
| Obedience | Health Care | Water Test | Draft Tests & Carting |
| Fun Matches | Ring Stewarding | Conformation | AKC Judge |
| Trophies | Grooming | Handling | Back Packing |
| Newf History | Breeding | Rally | Other _____ |

Please list the following information on the back of this application for each dog you own:

AKC Registered Name, Call Name, Age, Color, Championship Points, Obedience Legs, Water Titles, Draft Titles, etc.

TYPE OF MEMBERSHIP DESIRED (Please read about membership types on the back of this form.)

REGULAR (\$25.00)*
MEMBERSHIP
RESCUE ADOPTION: _____
<input type="checkbox"/> INDIVIDUAL MEMBERSHIP <input type="checkbox"/> JOINT MEMBERSHIP

* SCNCs fiscal year runs from November 1 to October 31. Applications received before May 15 are for the current calendar year through October 31. Applications received May 15 or later are for the balance of the current calendar year and for the following calendar year through October 31.

I (we) agree to abide by the constitution and bylaws of the American Kennel Club, the Newfoundland Club of America, and the South Central Newfoundland Club.

Applicant(s) signature & date _____

Signatures of two SCNC members in good standing and date:

 Printed Name of member(1)

 Signature of member (1)

 Printed Name of member(2)

 Signature of member (2)

Return completed application and check payable to SCNC to:

SCNC Membership Chair: Dennis Carter, 1416 W. Richmond St., Kokomo, IN 46901 Email: newffur@hotmail.com

REGULAR: Open to all persons 18 years or older who are in good standing with the American Kennel Club and who subscribe to the purposes of the Newfoundland Club of America. These members reside in the service area boundary of the South Central Newfoundland Clubs (service area shall be comprised of the area within a 200 mile radius of Columbus, IN) and shall have full voting privileges, may serve on the Board of Directors and chair committees, if current dues are paid. Regular membership may be individual or joint. A joint membership is two individuals living at the same address and each shall be entitled to one (1) vote.

ASSOCIATE: Open to all persons 18 years or older who are in good standing with the American Kennel Club and who subscribe to the purposes of the Newfoundland Club of America and the South Central Newfoundland Club. These members reside outside the service area boundary of South Central Newfoundland Club (service area shall be comprised of the area within a 200 mile radius of Columbus, IN) and shall have all rights and privileges of regular membership except voting, the ability to hold office, or serve as committee chair, as long as current dues are paid. Associate membership may be individual or joint.

JUNIOR: Open to all persons 10 through 17 years of age. Juniors cannot vote; hold office or hold appointed leadership positions. They may convert to regular memberships upon reaching their 18th birthday.

If you have questions or need additional information please contact:

SCNC Membership Chair: Dennis Carter, 1416 W. Richmond St., Kokomo, IN 46901 **Email:** newffur@hotmail.com