The Schipperke Club of Canada

Application for Membership

** Please print **** Please circle one: New Application or Renewal

Name: Mr. Mrs. Ms. Miss _____

Address: _____

_____

Telephone: Home: _____ Bus.: _____ Fax : _____ E-mail: _____

Please indicate whether or not you want your Phone number listed in the membership roster. Yes No

Occupation:_____

_____

Reg'd Kennel Name *(if any)*: _____

Number of Schipperkes presently owned? _____

CKC Mbrshp#_____
Tattoo # _____
MicroChip _____

From Whom Did You Obtain Your Present Schipperke(s)? *(Please list names and addresses)*:

_____

_____

_____

Number of Years Involved With Schipperkes: _____ In Purebred Dogs:_____

Other breed(s) Currently Owned? _____

Are You Active In:

Conformation	Obedience
Breeding	Agility
Flyball	Other

Current/Past Affiliations With Other Dog Clubs, and Positions Held: *(Please indicate year/s)*

_____

_____

_____

_____

Please Provide A List of Schipperkes Currently Owned or Co-Owned By All Applicants:

Dog's Reg'd Name	CKC/AKC #	Gender	Spayed/ Neutered	Sire	Dam	Breeder	Date of Birth

Please include A Short Introduction, *including your interests in the Sport of Purebred dogs, titles you have put on your dogs, and other hobbies, etc.: (An additional sheet may be used if necessary.)*

_____

_____

_____

_____

_____

_____

_____

Names and Addresses of Two Sponsors For This Application

Who must be Schipperke Club of Canada (Regular) Members **(New Applications Only)**

Sponsor # 1: _____
_____
_____
_____

How Long Have You Known Your Sponsor: _____

Sponsor # 2: _____
_____
_____
_____

How Long Have You Known Your Sponsor: _____

Two Sponsor's Letters Must Be Attached To This Application In Order For It To Be Processed! *(New Applications Only)*

I agree to abide by the Constitution and By-Laws of The Schipperke Club of Canada, and the rules of the Canadian Kennel Club.

As a member of The Schipperke Club of Canada, I agree to support and uphold the Code of Ethics. Evidence of failure to do so may result in disciplinary action as provided in the By-Laws of The Schipperke Club of Canada.

I, hereby, grant permission to The Schipperke Club of Canada to verify any information relevant to the processing of this application.

Signed: _____ **Date:** _____

_____ _____

Make All Fees Payable to:
The Schipperke Club of Canada

Regular	Associate	Household	Junior (10-17 yrs)
$20.00	$20.00	$25.00	$20.00

Please indicate which type of membership you are re/applying for.

Please Mail Your Completed Application Form with Fees to the Current SCC Secretary as Listed Below.

Michelle Van Eenoo
R.R.#1
Mt. Elgin ON Canada N0J 1N0

FOR ADMINISTRATION USE ONLY

Received: _____ By:_____
Date : _____

Processed : Fees and copy application sent to Treasurer : _____

Receipt Sent By Treasurer: _____ **Added To Membership List By Secretary: _____**
Date **Date**

(Amended October 2008)