

Northern New Jersey Great Dane Club Membership Application

NAME: _____ TELEPHONE:(home) _____

(work) _____

ADDRESS: _____

(cell) _____

(fax) _____

CITY, STATE, ZIP: _____ E-MAIL _____

Are you a member of the Great Dane Club of America? Yes No

Are you 18 years of age or older? Yes No

List other All-Breed or Specialty Clubs to which you now belong or have belonged and offices held (if any): _____

If elected to Membership, are you be willing to serve on a Committee(s): Yes No

Committee(s) interested in working on: (please check ANY of interest)

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Advertising/Catalog | <input type="checkbox"/> Dinner Arrangements | <input type="checkbox"/> Membership | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> Audio/Photography | <input type="checkbox"/> Obedience Classes | <input type="checkbox"/> Roster | <input type="checkbox"/> The Newsletter |
| <input type="checkbox"/> Awards | <input type="checkbox"/> Historian | <input type="checkbox"/> Pet Therapy/Health | <input type="checkbox"/> Show Handling Classes |
| <input type="checkbox"/> Breed Trophies | <input type="checkbox"/> Match Show | <input type="checkbox"/> Point Show | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Budget / Audit | <input type="checkbox"/> Material/Property | <input type="checkbox"/> Programs | <input type="checkbox"/> Sunshine |
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Meeting Hospitality | <input type="checkbox"/> Public Education | <input type="checkbox"/> Web Site |
| <input type="checkbox"/> Phone Tree | <input type="checkbox"/> Librarian | | |

If elected to Membership, I hereby agree to abide by the Constitution and By-Laws of the Great Dane Club of Northern New Jersey and the Rules and Regulations of the Great Dane Club of America and American Kennel Club.

Signature of Applicant

Annual Dues, check application box	ONE time Application Fee:	\$10.00	<input type="checkbox"/>
	Individual Membership	\$25.00	<input type="checkbox"/>
	Two Members of Immediate Family	\$40.00	<input type="checkbox"/>
	Junior Membership	\$10.00	<input type="checkbox"/>

Note: 1) Application fee must be included with membership application and is not refundable.
2) Annual Dues should not be paid until membership is accepted.

Sponsorship		
Name of Sponsor	Signature of Sponsor	Length of time known

There must be two sponsors from different families for each applicant.
Letters of Recommendation from each Sponsor must accompany this application.
Please forward completed application along with application fee to:

FOR CLUB USE ONLY

Received by Membership Chairperson _____

Read at meeting _____

Voted on: _____

Notice to membership _____
Accept Decline