



Cyclone Country Kennel Club Membership Application

Name(s) _____ Phone _____
Address _____ Email _____
_____ Are you over 18 years of age? _____

Number of dogs currently owned _____ Co-owned _____
Number of dogs currently owned who are spayed or neutered _____
Breed(s) of dogs currently owned _____

Do you exhibit in Breed? _____ Obedience? _____ Other? _____
If "yes", indicate the average number of shows per year _____
If "no" would you be interested in Breed? _____ Obedience? _____ Other? _____

Have you ever registered a litter with the AKC? Yes _____ No _____
Have you ever bred a litter which was not registered with the AKC? Yes _____ No _____
If you do breed, how many litters do you breed per year? _____
If you have not yet bred a litter, do you have any interest in breeding? Yes ___ No ___

List any dog clubs to which you belong _____

Describe any dog related activities in which you are currently involved. _____

Describe any club related activities in which you would be interested in participating.

Signature of Applicant(s) _____

Signature of Sponsors _____

Dues: \$10/Single Membership, \$15/Family Membership
Dues must accompany application.

Date Applied _____ Date Approved _____