



GREATER DENVER SOFT COATED WHEATEN TERRIER CLUB, INC.

MEMBERSHIP APPLICATION

Name(s):			
Street Address:			
City, State, Zip:			
Phone #1:		Phone #2:	
Email #1:		Email #2:	

General:

How did you hear about our Club?	
How many dogs do you currently own? What breeds?	
Where did you purchase your Wheaten Terrier(s)?	
Are you a breeder? If yes, number of litters within the last year.	
Do you show your dogs in conformation or compete in performance events? If yes, what events?	
If you are currently a member of a dog-related club, please state the name of each club, how long you have been a member, and what offices you have held.	
How many Wheatens have you owned over the years?	
What are the names/ages of your current Wheatens?	
What are the ages of your children living at home with you? (We ask so we can provide family-friendly events & items that may engage your children.)	

How can the Club help you?

Grooming Instruction		Nutritional Info	
Training Techniques		General K9 Education	
Veterinary Info		Other (describe)	

How can you help the Club?

Plan/organize events		Help at dog shows	
Creative arts (drawing, graphics, crafting, writing, photography)		Website/Facebook maintenance	
Other - please describe			

By providing your email address, you are helping the Club reduce copying and mailing expenses. You authorize the Club to provide you with announcements, notification of Club meetings and other correspondence by email delivery and you release the Club from any liability, loss or damage resulting from your failure to receive such correspondence due to circumstances outside the control of the Club.

I agree, if accepted into membership, to abide by the Bylaws and Code of Ethics of the Greater Denver Soft Coated Wheaten Terrier Club, Inc., and by the rules and regulations of the American Kennel Club.

____ I am applying for Regular Membership. Regular Members are eligible to vote and to hold office. An application for regular membership **requires the endorsement of two regular members who have known you for at least six months.**

____ I am applying for Associate Membership. Associate members are not eligible to vote nor to hold office. No endorsement of any regular member is required.

Signature:		Date:	
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ENDORSER Signatures for Regular Membership Application:

Each endorser attests as follows: I have been a member of the GDSCWTC for at least two years and have known the applicant for at least six months. I can attest that the applicant is or would be a responsible dog owner.

Endorser's signature:		Date:	
Endorser's signature:		Date:	

Check One:

	Dual Membership (two members of same household) = \$25.00 per year
	Individual Membership = \$20.00 per year

Please make your check payable to GDSCWTC, Inc. and send it with your application to:

Helen Reuben
3007 So. Williams Street
Denver, CO 80210

Questions? Please contact Helen at helenco7@comcast.net

The Board of Directors will review your application at its next regularly scheduled meeting and notify you of its decision shortly thereafter.

THANK YOU!