



COLLIE CLUB OF GEORGIA, INC.

Application for Membership

Membership dues shall be \$35.00 per person, per year and \$50.00 per couple per year. Junior membership shall be \$1.00 per year.

Dues are payable at the time of submission of this application and then on or before July 1 of each following year. Members elected to membership after January 1 are not required to pay dues for the current year. Dues accompanying this application will be applied to the following year.

NAME: _____

ADDRESS: _____

CITY: _____ STATE/ZIPCODE: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

If you maintain a Kennel, name of Kennel: _____

If you are you now or have ever belonged to another dog club(s), please list each, length of membership, and any offices/duties you held/performed.

Which areas of Collies do you have an interest?(Please circle all that apply)

Conformation Obedience Agility Therapy Herding

Other(please list): _____

I (We) make application for membership in the *Collie Club of Georgia, Inc.*, and in doing so agree to abide by the Constitution and By-Laws of the *Collie Club of Georgia, Inc.* I agree to work conscientiously to achieve the purpose of the club as stated in the bylaws which is:

1. To advance the best interest of the Collie.
2. To encourage discussions and study of the issues pertinent to the Collie.
3. To support and conduct matches, dog shows, and other trials under the rules of the American Kennel Club.

I understand that Memberships are based on the current calendar year, that dues are payable on July 1 of each calendar year. My privileges and rights as a member commence from the date of acceptance by vote of the current membership.

Applicant Signature: _____ Date: _____

Joint Applicant Signature: _____ Date: _____

(Both signatures are required for joint membership)