



GSDCC Inc Application for Membership

Type of Membership (circle one)

Ordinary
Family
Junior (Date of Birth)
Associate

Are you involved in IGP/FCI Events? YES / NO

If yes, please visit: <http://gsdccbranch.ca> for further information.

NAME 1:

NAME 2:

NAME 3 (or JUNIOR):

KENNEL NAME:

STREET ADDRESS:

CITY:

PROVINCE/STATE:

POSTAL/ZIP CODE:

EMAIL:

TELEPHONE:

Do you own a registered or registerable GSD?

Do you breed or plan to breed your GSD?

Registration #:

Are you a member of the CKC?

If yes, CKC #:

Are you a member of any other dog club?

If yes, which club(s)?

Do you have sponsors? Sponsor must be a current member of the GSDCC Inc.

NAME:

CONTACT:

NAME:

CONTACT:

If accepted as a member, I will uphold the Constitution and By -Laws of the GSDCC Inc.

SIGNATURE:

DATE:

Submit completed form to: Molly Snider, Membership Chair **Email to:** bokenkampgsd1@aol.com
55233 Light Line, RR # 1, Vienna, ON N0J 1Z0
CAN: (519) 866 – 3257 USA: (409) 658 – 6912