



**MEMBERSHIP APPLICATION**

**NAME:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone/Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Interested in (check all that Apply)

- |                                       |                                    |                                       |
|---------------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Conformation | <input type="checkbox"/> Scentwork | <input type="checkbox"/> Agility      |
| <input type="checkbox"/> Obedience    | <input type="checkbox"/> FAST CAT  | <input type="checkbox"/> Beagle Lover |

**SPONSORS:** Must be Members of Stockton Beagle Club

Sponsor #1: \_\_\_\_\_ Sponsor #2: \_\_\_\_\_

I agree to abide by the Constitution and bylaws of the Stockton Beagle Club

Signature/s: \_\_\_\_\_ Date: \_\_\_\_\_

*Dues: \$20 per member. \$30 per couple/household. Junior (under 18, non voting) Free*

Mail Check to: Shelley Crovetto, 1995 Gustafson Fernley, NV 89408

Date check received \_\_\_\_\_ Check # \_\_\_\_\_