



LAKEHEAD KENNEL CLUB

Membership Application

Section 1 New Application _____ Renewal _____ Change of Address _____

Section 2 Type of Membership (check one) _ Single (\$20) _ Family (\$25) _ Junior (under 18) (\$5)

Section 3 Identification

Name(s) _____

Address _____

City: _____ Prov/State: _____ Postal/Zip Code: _____

Phone #: _____ Fax #: _____

E-mail: _____ Web Site: _____

Section 4 Membership Information

(If you are already a member in good standing skip to Section 6)

What breed of dog(s) do you have? _____

What areas of dogs are of interest to you? _____

Why do you want to become a member of LKC? _____

Are you a member in good standing of any other dog clubs? _____

Are you willing to be a resource for your breed and have your contact information on our web site? _____

What areas of LKC as a club would you like to get involved working on/with?
(Please check as many as you like)

___ Matches ___ Shows ___ Various Health Clinics ___ Newsletter

___ Web Site ___ Seminars & Workshops ___ Executive Position

Other (please specify) _____

Section 5 Sponsorship

(If you are already a member in good standing skip to Section 6)

Sponsored by: (two member sponsors required)

Signature

Date

Signature

Date

Section 6 Authorization

Applicant's Signature

Date

Mail completed form with fee to: Lakehead Kennel Club
Box 29027, McIntyre Centre, Thunder Bay, ON., P7B 6P9

Date Application Received: _____ Date Membership Approved: _____