



DURHAM KENNEL CLUB Candidate Membership Application

I/We hereby apply for Candidate Membership status in the Durham Kennel Club and agree, upon acceptance, to abide by the by-laws, regulations, and rules of the Durham Kennel Club and the American Kennel Club.

Date: _____

Mr./Mrs./Ms. _____ Signature: _____
(print) (sign)

(joint applications should include both names and signatures)

Address: _____

Home Phone: _____ Email: _____

Occupation: _____ Bus. Phone: _____

Breed(s) of Dogs owned: _____

Do you maintain a kennel? _____ Professional _____ Personal _____ # of Runs: _____

Kennel Name: _____

Activities you participate in with your dog (check all that apply)

- ☐ Conformation ☐ Obedience ☐ Agility ☐ Earthdog ☐ Herding ☐ Coursing
- ☐ Hunt/Field Trials ☐ Terrier Trials ☐ Therapy ☐ Freestyle ☐ Tracking

other activities _____

Titles achieved by your dogs _____

Other Dog Club Memberships held _____

Have you ever been denied membership in a dog-related club? _____ (If yes, please attach explanation)

Have you ever been disciplined, reprimanded or suspended by a dog related club? _____ (If yes, please attach explanation)

Are you, or have you ever been an AKC approved judge? _____ Professional Handler? _____

The DKC newsletter is available as a PDF document by email, or through the DKC website. How do you wish to receive your newsletter? (circle) Email or Website

The DKC website has a facility that allows members to send e-mail to all members on the list with messages of dog related topics. Check if you don't want to be on that list. _____

How did you learn about the Durham Kennel Club? _____

What are your reasons for seeking membership? _____

Please complete in full and return with annual dues in the amount of (effective 6/1/2012): \$30.00 for single applicant, \$40 for family, for juniors \$10.00

(Jan – April, deduct 50%)

Return this form and dues to:

Terri Toohil **ph: 919-471-8303**
DKC Membership Chair **email: ttoohil13@aol.com**
5017 Pine Trail Drive
Durham, NC 27712

for DKC use: Read _____ Accepted _____
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VOLUNTEER OPPORTUNITIES

Please check areas where you might be interested in volunteering during the coming year. Also list any special skills, training or experience you might have. This will allow committee chairs to know who to contact when help is needed. Thank you.

Name: _____

Phone: _____ E-mail: _____

- | | |
|--|---|
| <input type="checkbox"/> Fall show/Obedience trial (September)
many helpers needed | <input type="checkbox"/> Cheer (to respond to illness and losses
within DKC) |
| <input type="checkbox"/> Spring show/Obedience trial (March)
many helpers needed | <input type="checkbox"/> Outside building projects (painting,
building repairs, brush clearing, trimming,
land cleanup, etc.) |
| <input type="checkbox"/> Fall agility trial (September) | <input type="checkbox"/> Inside building projects (painting, repairs,
etc.) |
| <input type="checkbox"/> Spring agility trial (April) | <input type="checkbox"/> Social committee (setup/cleanup for club
meetings) |
| <input type="checkbox"/> Obedience trial (December) | <input type="checkbox"/> Public education programs |
| <input type="checkbox"/> Obedience show & go's (setup, judging,
stewarding) | <input type="checkbox"/> Library |
| <input type="checkbox"/> CGC tests | <input type="checkbox"/> Program |
| <input type="checkbox"/> Tracking tests (test secretary,
tracklaying, coordinating lunch) | <input type="checkbox"/> Recycling |
| <input type="checkbox"/> Obedience classes (instructors,
assistants, organization) | <input type="checkbox"/> Building rental |
| <input type="checkbox"/> Rally classes (instructors, assistants,
organization) | <input type="checkbox"/> Awards committee |
| <input type="checkbox"/> Agility classes (instructors, assistants,
organization) | <input type="checkbox"/> Yard sale (setup/cleanup, staffing) |
| <input type="checkbox"/> Show handling (instructors, assistants,
organization) | <input type="checkbox"/> Special skills, training, or experience |
| <input type="checkbox"/> Finance committee | _____ |
| <input type="checkbox"/> Clinic/workshop/seminar planning | _____ |
| | _____ |
| | _____ |

**Please return completed form to Terri Toohil
with your Membership Application Form
(Address is on membership form)**



Durham Kennel Club E-mail Authorization

**This form only needs to be filled in once
unless you change your authorization.**

Name: _____

Phone: _____

E-mail: _____

I authorize the Durham Kennel Club, its officers, directors and other representatives to communicate such notices as may be required and permitted by the club bylaws to me via electronic mail (e-mail). I understand that such notices include notices of regular and special club and board meetings, dues notices, meeting minutes and the like.

I exclude from the above authorization notices of the following type: (specify)

I understand that this authorization will remain effective until I may modify or revoke it.

I release the Durham Kennel Club, its officers, directors and other representatives from any liability should I receive a notice late or fail to receive a notice due to circumstances that are beyond its or their control.

I will keep the club informed of any changes to the e-mail address to which I desire notices to be directed.

Printed Name: _____

Signature: _____