



SAMMAMISH KENNEL CLUB,
MEMBERSHIP APPLICATION

Mail completed application to:

Rusty Kingery, SAM Membership Chair, 27109 SE 166th Pl., Issaquah, WA 98027

Name: _____

(List both names if applying as a couple)

Address: _____

Phone _____ Email: _____ Fax: _____

Occupation: _____ Business: _____

Phone: _____ Length of time in purebred dog activities: _____

Active in: (circle all that apply) Obedience Field Trials Judging Breeding Conformation

Other _____ Past & present breeds owned: _____

Other dog club affiliations: _____

In applying for membership, I hereby agree to the terms of the Constitution, By-Laws and Standing Rules of the Sammamish Kennel Club and certify that I am in good standing with the American Kennel Club. I am submitting this application with the required \$10 annual membership fee (\$15 for family).

Applicant(s) signature _____ Date _____

Sponsor _____ Sponsor _____

FOR CLUB USE:

Date of first reading _____ Date of final approval _____