



# DURHAM KENNEL CLUB Full Membership Application

## TO THE ATTENTION OF THE MEMBERSHIP CHAIR:

I/we have been a member candidate of the Durham Kennel Club for the required six months, and I/we would like to be considered for full Membership.

Name(s) (print): \_\_\_\_\_

Signature(s): \_\_\_\_\_

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

Phone and email: \_\_\_\_\_

DKC meetings attended (dates): \_\_\_\_\_

Services to DKC given: (type and dates) \_\_\_\_\_

Breeds owned: \_\_\_\_\_

### Two Sponsors Are Required for Regular Membership (They must be Regular or Life Members of DKC)

Sponsor 1 (print) \_\_\_\_\_ (sign) \_\_\_\_\_

Sponsor 2 (print) \_\_\_\_\_ (sign) \_\_\_\_\_

Upon receipt of this application, you will be presented to the DKC Board at its next regular meeting. Upon approval by the Board, you will then be presented to the Membership at its next regular meeting and a written vote will be taken. The decision of the Membership is final.

#### Return this form and dues to:

**Carol Rives**                      **ph: 256-653-6413**  
**DKC Membership Chair**      **email: carolrivesad@gmail.com**  
**4313 White Cliff Ln.**  
**Durham, NC 27712**

#### Regular Membership Dues:

*Effective June 1, 2012*  
Single Member \$30.00  
Family Member \$40.00  
Juniors \$10.00  
(Jan – April, deduct 50%)

Presented to Board: \_\_\_\_\_ Voted into Membership: \_\_\_\_\_



**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)<br>many helpers needed        | <input type="checkbox"/> Cheer (to respond to illness and losses<br>within DKC)   |
| <input type="checkbox"/> Spring show/Obedience trial (March) many<br>helpers needed          | <input type="checkbox"/> Outside building projects (painting, building<br>repairs, brush clearing, trimming, land cleanup,<br>etc.) |
| <input type="checkbox"/> Fall agility trial (September)                                      | <input type="checkbox"/> Inside building projects (painting, repairs,<br>etc.)  |
| <input type="checkbox"/> Spring agility trial (April)  | <input type="checkbox"/> Social committee (setup/cleanup for club<br>meetings)  |
| <input type="checkbox"/> Obedience trial (December)  | <input type="checkbox"/> Public education programs  |
| <input type="checkbox"/> Obedience show & go's (setup, judging,<br>stewarding)               | <input type="checkbox"/> Library  |
| <input type="checkbox"/> CGC tests   | <input type="checkbox"/> Program  |
| <input type="checkbox"/> Tracking tests (test secretary, tracklaying,<br>coordinating lunch) | <input type="checkbox"/> Recycling  |
| <input type="checkbox"/> Obedience classes (instructors, assistants,<br>organization)        | <input type="checkbox"/> Building rental  |
| <input type="checkbox"/> Rally classes (instructors, assistants,<br>organization)            | <input type="checkbox"/> Awards committee   |
| <input type="checkbox"/> Agility classes (instructors, assistants,<br>organization)          | <input type="checkbox"/> Yard sale (setup/cleanup, staffing)  |
| <input type="checkbox"/> Show handling (instructors, assistants,<br>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 Carol Rives  
with your Membership Application Form  
(Address is on membership form)**