

Manitowoc County Kennel Club – 2024 Membership Application



Name: _____

Street: _____

City/State: _____ Zip: _____

Phone: _____ Email: _____

Manitowoc County Kennel Club, Inc. is a very diverse club with members interested in and participating in almost every facet of dog exhibition. We are interested in our new members' activities and interests.

Breed(s) of dog(s): Owners of mix-breed dogs are welcome.

Areas of Interest: Agility Breeder Conformation Pet Nose work
(Please circle) Field Rally Obedience Tracking

Your Occupation: _____

Special hobbies (interests outside of the dog world): _____

I am (we are) in good standing with the American Kennel Club and if I (we) become a member(s) of the Club, I (we) agree to abide by the Constitution, Amendments, and By-Laws of this organization (see Membership under Section VI of Policies and Procedures).

Signature(s): _____

The applicant must attend at least one meeting prior to or during a meeting where the applicant's membership is presented for a reading/vote to join the club.

First year's membership fees: Junior (9-17) \$25; Single \$45; Family \$65; Professional Single \$45.
25 volunteer work hours required/annum (prorated for new members at 2 hours per month. Unworked hours will be charged at \$15 per hour and added to members renewal dues at the end of the year.

Members with access to the Valders grounds for field training must pay a field assessment fee of \$75 in addition to their club dues. This also applies to Junior & Lifetime members. Professional trainers field assessment fee is \$300 plus \$30 per unworked hour. Field assessment fees go towards the Valders grounds maintenance and improvements. Members who do not pay field assessment fees may not use the Valders grounds.

All new membership applicants must be sponsored by two club members in good standing.

Proposed by: _____ Seconded by: _____

1st Reading Date: _____ Present/ Not present

At a regular meeting of the Manitowoc County Kennel Club, Inc. held on _____

This application for membership was: Granted ___/Denied ___

President's signature: _____ Secretary's signature: _____

Mail to: MCKC Secretary
Paul Chetcuti
2613 Oak Ridge Circle, De Pere, WI 54115
Email: secretarymckc@gmail.com

Amount Enclosed: \$ _____
Application fee/s must accompany application