



Membership Application

(Please print clearly – we suggest you keep a copy for your records)

Name _____ Email: _____

Name _____ Email: _____

(Household Memberships Only)

Address _____

Telephone (____) _____ Occupation(s) _____

The information above is used for club purposes only to contact and inform its members of news and events relevant to our mission. Your name, city, state, zip and occupation and email address will be available to all active members via our Mayflower PWD Club Members Directory.

If you do not wish for your information to be included in this directory, please check to Opt-Out. _____

Notices regarding meetings, dues notices, minutes, newsletters, and other club business will be sent to the email addresses provided above. Please check to Opt-Out if you do NOT wish to receive email communications: _____

Signature: _____ Date _____

What activities are you interested in? (Check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Grooming Workshops | <input type="checkbox"/> Health Workshops | <input type="checkbox"/> Manners Workshops |
| <input type="checkbox"/> Agility Workshops | <input type="checkbox"/> Obedience/ Rally Workshops | <input type="checkbox"/> Water Workshops |
| <input type="checkbox"/> Nosework | <input type="checkbox"/> Conformation | <input type="checkbox"/> Tracking |
| <input type="checkbox"/> Athletic Conditioning | <input type="checkbox"/> Junior Handling | <input type="checkbox"/> Mentoring |
| <input type="checkbox"/> Social Get Togethers | <input type="checkbox"/> Play Dates | <input type="checkbox"/> Health Clinics |

Types of Membership: Please see additional details at www.mayflowerpwd.org/membership.

- Voting/Household Voting: \$35/\$45 per year.** Open to existing members only. Associate members wishing to upgrade their membership may apply after the completion of their first membership year and with the sponsorship of two current voting members of the club
- Associate/Household Associate: \$25/\$35 per year.** Open to all persons and first time members. Supporting members may not hold office or vote.
- Junior: \$10 per year.** Same as Associate Membership, except open to anyone under 18 years of age.

The AKC asks members to provide the following information:

- Are you an approved AKC Judge (Indicate type) _____
- Presently own a registerable pure-bred dog(s) _____
- Are you a breeder _____
- # of registered any litters in the past three years _____
- Have exhibited at AKC approved events within the last two years (indicate type(s)) _____

Mail Completed Application and Membership Fee (made out to Mayflower PWD Club)

Michael LaRoche, Assistant to the Treasurer, 34 Lowell Road, Wellesley Hills, MA 02481