

Eastern Carolina Pointing Breeds Club
Membership Application

Name _____

Address _____

Phone _____ e-mail _____

Occupation _____

How many dogs do you own? _____ How many AKC registered dogs do you own? _____

List your dogs

Registered name	call name	breed	female/male	Titles
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

What other dog clubs do you belong to? _____

Dog activities: ___ breeder ___ conformation ___ agility ___ tracking
___ Field trials ___ Hunting tests ___ other: _____

Other information about yourself that could benefit this club.
(certification, experience, safety, classes etc.)

Applicant agrees to abide by the constitution and By-laws of the Eastern
Carolina Pointing Breeds Club and the American Kennel Club

Applicant: _____ Date _____

Endorsed by two members _____

Date membership accepted: _____