

# Mid-Florida Golden Retriever Club, Inc.

## MEMBERSHIP APPLICATION

**Official Use Only:**

Newsletter notified: \_\_\_\_\_ Paid: \_\_\_\_\_  
Date of Meetings Attended: \_\_\_\_\_ & \_\_\_\_\_  
Dates Application Read: \_\_\_\_\_ Date Membership Accepted: \_\_\_\_\_

Mail To: Ann Rowe  
23840 Oak Valley Lane  
Sorrento , Florida  32776

Type of Membership:  Individual (\$25)  Family (\$25)  Associate (\$25)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

OCCUPATION \_\_\_\_\_

**Primary Interests (Mark all that apply)**

Agility  Conformation  Obedience  Field  Tracking  Pet Owner

Other Interests (Please explain)

List some of the activities you have participated in within the last year:

Are you a member of any other dog organizations? If so, please give name of club, offices held, and duties if any:

**In what areas would you be willing to volunteer?**

Fun Matches  Independent Shows  Field Activities  Community Service

Seminars/Clinics  Telephone Work

What do you expect to receive from this club?

List Dogs Owned: (Additional dogs may be entered on next page)

Breed \_\_\_\_\_ Call Name \_\_\_\_\_

Registered Name \_\_\_\_\_

Titles \_\_\_\_\_

Name / Signature \_\_\_\_\_ Date \_\_\_\_\_

Name / Signature \_\_\_\_\_ Date \_\_\_\_\_

Sponsors Name \_\_\_\_\_ Date \_\_\_\_\_