

Airedale Terrier Club of Metropolitan Washington, DC

Membership Application

Member 1 _____ Email Address _____

Member 2 _____ Email Address _____

Member (s) _____ Phone _____
 Mailing Address _____ Numbers _____

APPLICANT READ AND SIGN:

I am interested in the Airedale Terrier and I subscribe to the Club's objectives below:

- *To urge those who breed Airedale Terriers to do so responsibly, with the welfare and improvement of the breed having the highest priority.
- *To urge members and breeders to accept the standard of the breed as approved by the AKC as the only standard of perfection by which Airedale Terriers shall be judged.
- *To do all in its power to protect and advance the interests of the breed by encouraging sportsmanlike competition at dog shows and obedience trials.
- *To conduct sanctioned and licensed specialty shows under the rules of the AKC.
- *To institute and maintain programs that promote the welfare of individual Airedale Terriers through rescue and education, and through any other means that the Club considers helpful.

I agree to abide by the Constitution and By-laws of the Club and of the AKC. (<http://www.airedales-dc.org/constitution-by-laws>)

I am over 18 years of age and in good standing with the AKC.

As an applicant, I will attend two Club functions to learn more about the ATCMW and to meet its members before becoming eligible for membership.

A function includes all activities and meetings run by the ATCMW. Ask your sponsors for information about upcoming Club functions.

Member 1 Signature _____ Member 2 Signature _____

Events Attended _____

Date of Application _____

Do you own an AKC registered Airedale? If yes, how many? _____ Do you breed or plan to breed your Airedale?

Do you own an unregistered or rescued Airedale? If yes, how many?

CHECK ALL ACTIVITIES THAT INTEREST YOU

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Pet Training | <input type="checkbox"/> Airedale Rescue | <input type="checkbox"/> ATCMW Newsletter | <input type="checkbox"/> Obedience/Rally Competition |
| <input type="checkbox"/> ATCMW Specialty | <input type="checkbox"/> Scottish Christmas Parade | <input type="checkbox"/> Pet Grooming | <input type="checkbox"/> Show Grooming |
| <input type="checkbox"/> Hospitality for Specialty | <input type="checkbox"/> Organize Show Trophies | <input type="checkbox"/> Plan Meeting Programs | |

Individual Membership-Individual members are included in the Club quorum requirement for general meetings, may vote at those meetings, and may hold elected office. Cost \$20 \$ _____

Household Membership - Individual members are included in the Club quorum requirement for general meetings, may vote at those meetings, and may hold elected office. (No more than 2 individuals at one address.) Cost \$30 \$ _____

Club Member Sponsors Sign: The applicant(s) are known to me, have attended two ATCMW functions, and to the best of my knowledge understand the Club's objectives.

1st Sponsor Signature _____ 2nd Sponsor Signature _____

Make check payable to ATCMW and send application to Jackie Peebles, 2011 Beacon Pl., Reston, VA 20191