



ST. PETERSBURG DOG FANCIERS ASSOCIATION, INC.

APPLICATION FOR MEMBERSHIP

Name(s): _____

Street Address: _____

City/State: _____ ZIP: _____ EMAIL: _____

Phone 1: _____ Phone 2: _____

Occupation: _____

Dogs Owned or Co-Owned:

Breed:	Number Owned Currently:	Litters Bred:	Owned Since:	Shown in Conformation, Obedience or Other Events? (Please Specify)

Are all of your dogs AKC registered: ___ Yes ___ No; If not, please explain:

Hobbies: _____

Please state why you wish to become a member of the SP DFA:

In which capacity you would like to help if you are accepted as a Club member?

_____ Administrative

_____ Show/Match Committee

_____ Clerical

_____ Refreshments

_____ Committee Work

_____ Other – Explain:

Have you been, or are you now, a member of any other dog club? _____ Yes _____ No

If yes, please provide names of clubs and years of membership:

Have you ever been suspended from the privileges of the American Kennel Club, Inc.?

_____ Yes _____ No; If yes, please explain:

PLEASE READ CAREFULLY BEFORE SIGNING

My signature below certifies that I agree to the following:

- A. I will not engage in wholesaling of litters, or individual sales of puppies or adult dogs to pet shops, pet dealers, catalog houses, regardless of quality or ability to register dog(s).**
- B. I will not allow my stud dog to be used as a sire of a litter that is to be sold as described under A.**
- C. I hold that such behavior is against the best interest of the SPDFFA and pure-bred dogs in general.**
- D. I will abide by the Constitution and By-Laws of the SPDFFA and the Rules of the American Kennel Club, Inc.**

SIGNATURE OF APPLICANT

DATE

PLEASE NOTE:

Dues must accompany this application. If the application is not accepted, payment will be refunded.

Two endorsements are required. Please use the attached page three of this application.

Applicants must attend at least three (3) meetings before they will be considered for membership.

SPDFA Membership Application of: _____

ENDORSEMENTS

(Endorsement by two non-related individuals is required. Please ask two current club members to support your application by completing the information below.)

FIRST ENDORSEMENT

I have known the applicant for _____ years _____ months. I believe the applicant would be an **active** and **constructive** member of the SPDFA because:

SIGNATURE OF ENDORSER

DATE

SECOND ENDORSEMENT

I have known the applicant for _____ years _____ months. I believe the applicant would be an **active** and **constructive** member of the SPDFA because:

SIGNATURE OF ENDORSER

DATE

FOR CLUB USE:

Dates Meetings Attended: _____ ; _____ ; _____ ;

Date Application Read: _____ Date of Vote: _____

Approved/Not Approved _____ Applicant Notified: _____

SIGNATURE OF SECRETARY _____ DATE _____

SPONSOR (if Junior Member): _____