



Miami Obedience Club, Inc.
Miami, Florida

Office Use Only:
1st Meeting: ___/___/___
2nd Meeting: ___/___/___
Due (Ck/Ca): \$ ___
Date Paid: ___/___/___
Date Posted: ___/___/___
Vote: ___/___/___

Membership Application Form

Name: _____ [] Single (\$20) [] Family (\$30)

Address: _____ FL _____
(Street) (City) (Zip)

Email: _____ Birthday: _____
(Month/Day)

Phone: (Home) _____ (Work) _____

Occupation: _____

Breed(s) of dog you own: _____

Titles Earned: _____

Other Clubs of which you are a member: _____

Why do you wish to become a member? _____

Please indicate which of the following committees that you are interested in:

- [] Agility Committee [] CGC Committee [] Match Committee
[] Membership Committee [] Newsletter Committee [] Program Committee
[] Seminar Committee [] Sunshine Committee [] Tracking Committee
[] Training Committee [] Trial Committee [] Others: _____

Sponsored by: _____ AND _____

Eligibility for membership: Any person who is in good standing with the American Kennel Club, who subscribes to the purposes and objectives of the Club, and who is of legal age in the State of Florida, is eligible for membership. Applicant must be involved or have an active interest in obedience training or have put an obedience title on a dog or be in the process of working for an obedience title.

I have read and accepted the above statements. Please consider me for membership in the Miami Obedience Club, Inc.

(Signature of Applicant) (Signature of Co-applicant)

(Date of Application) (Date of Application)