

# GERMAN SHEPHERD DOG CLUB OF WISCONSIN, Inc Application

Visit us at [gsdcw.com](http://gsdcw.com) or Facebook at German Shepherd Club of Wisconsin

An applicant must be eighteen (18) years of age. **All dogs must be A.K.C. or P.A.L. Registered GSD.**

Each applicant must complete an application form – Family members will be combined.

**All New Members or New Members Starting the 8-week Beginner Obedience Class Must Provide the Shot Records for their dog(s).**

**\*\*\*\*Distemper Hepatitis Leptospirosis Para-influenza Parvo Rabies Bordetella\*\*\*\***

***Dues must accompany this application for consideration:***

\$78.00 Single Membership \_\_\_\_\_ \$98.00 Family Membership \_\_\_\_\_

\$10.00 One-time initiation fee / person \_\_\_\_\_

***Training fees per person***

\$150.00 / yearly training fee \_\_\_\_\_

will be auto billed in one year of signup, unless receive written notice of club termination.

If you have any questions, please call the Membership Director Wendy Ullrich at 262-470-5469. Mail Application to: W224S6950 Guthrie Dr, Big Bend, WI 53103, make checks payable to G.S.D.C.W.

*Interested in volunteering at the club please select a category:*

1. Show Committee
2. Grounds / Building Maintenance
3. Event Prep
4. Testing Committee

## **Applicant and Dog Information:**

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Registered Owners of Dog: \_\_\_\_\_

Registered Dog's Name: \_\_\_\_\_

Call Name: \_\_\_\_\_

A.K.C. or P.A.L. # \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

I agree to abide by the rules and regulations of the GSDC of Wisconsin, Inc.

Signature: \_\_\_\_\_ Date : \_\_\_\_\_

## **Internal Use only:**

Received \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Cash \$: \_\_\_\_\_

Date approved: \_\_\_\_\_

Board Members Initials: \_\_\_\_\_