BEARDED COLLIE CLUB OF SOUTHERN CALIFORNIA

MEMBERSHIP APPLICATION

Make checks payable to ***Bearded Collie Club of Southern California or inquire about paying by Zelle*** and return along with this form to Mary Parker, Treasurer, 24040 Eagle Mountain Road, West Hills, CA 91304. If you have any questions, please don't hesitate to contact Tammy Gerenser, Membership Chair, at tgerenser@gmail.com or (805) 455-7252

Print Name(s) _____

Address _____

Telephone: (home) _____ (Cell) _____

Email: _____

How many Beardies do you own? _____ Names and ages _____

Where did you get your Beardies? _____

Are you a breeder? _____ Kennel Name _____

Other dogs that reside in your home: Breed and call name: _____

We welcome your participation at our events and on any committees. Areas that may interest you:

☐Agility ☐ Fundraising ☐ Herding ☐ Education ☐ Barn Hunt ☐ Fun Days/Bounces ☐ Show
☐ Newsletter ☐ Website ☐ Obedience/Rally ☐ Other: _____

LEVEL OF MEMBERSHIP YOU DESIRE

☐ **Full Voting Membership, age 18 and older** $25

Actively involved by attending meetings to ensure quorums.
Enjoy all club privileges, including one vote per membership and the right to hold office.
Voting rights are activated after attending two meetings

Please list the BCCSC meetings/events you have attended:

1) _____ 2) _____

☐ **Associate Non-Voting Membership, age 18 and older** $25

Recommended if you cannot regularly attend meetings during the year.
Enjoy all club privileges, with the exception of voting or right to hold office.

*****Please review the Club Bylaws, Constitution and Code of Ethics at bccsc.net prior to signing this document.**

I/we hereby apply for membership in the Bearded Collie Club of Southern California, and agree to abide by its Bylaws, Constitution and Code of Ethics, and by the rules of the Bearded Collie Club of America. I have read the BCCSC Constitution, Bylaws, and Code of Ethics. The BCCSC uses email and the website for meeting notifications and event announcements. I understand that it is my responsibility to contact the Club secretary to make arrangements for special postal communications if necessary.

I(we) agree to ALL COMMUNICATION TO BE BY EMAIL.

Signature: _____ Date: _____

Signature: _____ Date: _____

Sponsor: (Please print name of the current BCCSC member's name: _____

Signature of Sponsor: _____ Date: _____