Northern California Whippet Fanciers Association, Inc



Membership Application

Date:				
Applicant Name:				
Address:	c	ity:	State: ZIP:	
Phone:	Home or Cell	Alternate Phone:		
Email:		FAX:		
Kennel Name (optional)	:			
How many Whippets do	you have?			
Who did you get your W	/hippets from?			
Which activities do you	like to do with your Whippet(s) and	d/or would like to learn mor	e about? (Check as many as a	pply)
Conformation FastCAT Obedience Rescue	Straight Racing Dock Diving Rally Other:	Oval Track Racing Tracking Agility	Lure Coursing Fly Ball Pet Therapy	
Classes of Membership Individual membership may b	(Note: All new applicants must apply at the	ne Associate level. After one year o	f Associate membership, applicati	on for ful
DUALActive Mer ponsehold, DUES ASSOCIATE (No a	ge restriction, not eligible to hold office ership (two members in the same house	chold, eligible to hold office and or vote, SPEED subscription incl	vote, one SPEED Subscription luded.) DUES \$ 15 per year. D	UAL
applicant is considered for		-	res must be completed before	
•		U		
Dates of Meetings atten	nded:	and		
Applicants for Active me membership. Events participated in an	embership must complete the secti	on below before they are to		
All Applicants must read Furthermore, I agree to lany claim for loss or inju- of a dog or member. Fur	I the following and sign below: "I a hold this club, its members, director ry which may be alleged to have be thermore, I agree to hold the aford ioned, or any other person, cause o	gree to abide by the Constitus, officers, agents, superinteren caused directly or indirect ementioned parties harmless	ntion & By-Laws of the NCW ndents or employees harmle ly to any person or thing by	ess fron the act
"I agree to the above"	X	Date:_		
Please return completed 474	application to: Guin Borstel, N 5 25th Street, San Francisco, CA 94	ICWFA Membership Chairpe 1114 (415) 826-8853 m		
Club Use Only:	Date of presentation	Voted on Approved	P Y / NDues Pa	aid?