



CAVALIER KING CHARLES SPANIEL CLUB
of GREATER SAN DIEGO
Membership Application

Please submit Application with Code of Ethics check made to CKCSCGSD
Mail to: c/o Michelle Mixon, P.O. Box 1191, Ramona CA 92065
Email: cavalierclubofsandiego@yahoo.com

DUES: (Please check type of membership and submit appropriate dues)
(Associate members may apply for regular membership after one year in good standing with 2 regular member sponsors)
\$20 Associate \$35 Associate Family \$30 Regular \$50 Regular Family Junior

Please print or type
NAME _____ OCCUPATION _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
Home phone _____ Work/Cell _____
Email _____
Kennel Name _____ Website _____

How did you hear about the club? _____

Reason for seeking membership: (Check all that apply)

Learn more about health and care of Cavaliers Interested in breeding Interested in exhibiting
 Interested in Obedience/Agility/Rally (circle) Interested in social events with my dog(s) _____

Current activity as a Cavalier owner: Owner Exhibitor (Conformation) Breeder (circle) Obedience/Agility/Rally

List all Kennel Clubs, Specialty or Obedience Clubs to which you belong and indicate dates of membership, positions held and term of each _____

Are your dogs registered with the AKC _____?

When did you first acquire a Cavalier King Charles Spaniel? _____

From whom did you acquire your Cavalier(s)? _____

How many Cavalier King Charles Spaniels do you own? _____

Average number of dogs you keep _____

Do you breed Cavaliers? _____ How many litters have you whelped in the last two years? _____

Would you be available to dedicate 3 to 4 hours at any of our AKC sanctioned events? (i.e. our yearly Cavalier Specialty show) Please circle: YES NO Area of club work where you might want to volunteer: Social events

Communications/newsletter Photography Design/decorations Graphic design Computer skills Fundraising

Other talents/interests: _____

I agree to abide by the constitution, bylaws (found on the club website) and code of ethics of the Cavalier King Charles Spaniel Club of Greater San Diego and of the AKC. Pursuant to our Bylaws, Article 2, Sections 1-4, your signature below authorizes the club to use email as the preferred method of communication.

APPLICANT SIGNATURE _____ **DATE** _____

Parent/guardian signature for JUNIOR Membership _____

(Parent/guardian must be a member in good standing with CKCSCGSD)

***Prospective members must be sponsored by two members in good standing and must attend two CKCSCGSD meetings or club events within 12 consecutive months prior to acceptance and vote by the membership.**

Sponsor signature #1 _____ **#2** _____

Meeting/Event #1 _____ **Date** _____

Meeting/Event #2 _____ **Date** _____

LEAVE THIS SECTION BLANK: CHECK RECEIVED CODE OF ETHICS SIGNED

Received _____ Reading _____ Meeting/event #1 _____ #2 _____ Sponsor forms (Reg. member) #1 _____ #2 _____