

Pacific NW Scentwork Club



Your Scentwork experience <input type="checkbox"/> AKC <input type="checkbox"/> NACSW <input type="checkbox"/> UKC <input type="checkbox"/> Other _____ Years in scentwork _____		<i>Circle all that apply</i> AKC SW level N A E M Det <input type="checkbox"/> NACSW level 1 2 3 E <input type="checkbox"/> Obedience CD CDX UD Rally <input type="checkbox"/> Barn Hunt <input type="checkbox"/> Hunt Tests/Trials <input type="checkbox"/> Conformation <input type="checkbox"/> Tracking TD TDX VST		<input type="checkbox"/> Scentwork Exhibitor Yrs _____ <input type="checkbox"/> Scent Work Trial Secretary <input type="checkbox"/> Scent Work Hide Steward <input type="checkbox"/> Scent Work Steward <input type="checkbox"/> Scentwork Instructor Yrs _____ <input type="checkbox"/> Attend Classes	
Years in AKC activities?		Other AKC activities not listed above			
Have you bred a litter in the last 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you an AKC Breeder of Merit <input type="checkbox"/> Yes <input type="checkbox"/> No					
Breed(s) you own now:					
Have you been on an AKC event committee (any type) ? <input type="checkbox"/> Yes <input type="checkbox"/> No Years____ Committees					
Have you held office in an AKC club? <input type="checkbox"/> Yes <input type="checkbox"/> No Positions:					
Your Name		Phone		Text? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address					
City, State, Zip		Email:			
Sign me up <input type="checkbox"/> I want to help with organizing <input type="checkbox"/> I want to help with events and have fun					
<input type="checkbox"/> Full Membership (voting rights and perks) \$20/individual					
<input type="checkbox"/> Associate Membership (support club from a distance, no meeting requirements) \$15/individual					
I agree to accept electronic notice of club meetings, dues notices, minutes and letters including board meetings by email or other allowed media. I agree the club will have no liability for such notification being received late or not received by me due to circumstances beyond the club's control. <input type="checkbox"/> Yes <input type="checkbox"/> No					
I agree to abide by the constitution and bylaws and the rules of The American Kennel Club.					
Signature				Date	
Apply & Pay on line https://form.jotform.com/Rainspring/PNW-SW-Club-App <i>Payment will show as 'My Dogs Gym' on your credit card statement</i>					
or Return form with your check to payable to PNW Scent Work Club					
Phyllis Dinsmore, Secretary c/o MDG 6237 Arbordale Dr SE, Salem, Oregon 97317					
More Details at https://pnwscentworkclub.com					