

Sacramento Valley Dog Fanciers Association, Inc. Membership Application 2024

Name:		
Second household name (if applicable):		
Address:		
City:		Zip:
Telephone: Applicant 1: ()		
Email Address(es):		
Type of Membership: Individual:	Household:	Junior (10–17):
Occupation(s):		
match committees (i.e., fundraising, ste		
How long have you been active in the s Are you a breeder? How many do How many litters have you bred in the p What breed/s do you own? Areas of participation: Conformation	port of dogs? gs do you currently own? _ past five years?	
Please list other club memberships, incl	uding officer and committe	e positions:
Are you in good standing with the Ame	rican Kennel Club?	
Please feel free to add more information	n on your background and i	nterests here, including areas outside

of dog sports. Continued on the next page.

Signature of two Clu	ub Members in	n good stan	ding who	are sponsorin	g your	application.	Each sponse	or
must be from a diffe	rent househol	d.						

(1)	
(2)	
()	

DUES: Individual Membership: \$20.00 | Household Membership: \$30.00 | Junior: No charge

I/We agree to abide by the Constitution & Bylaws of the Sacramento Valley Dog Fanciers Association, Inc., (available at sacvalleydfa.com) and by the Rules of the American Kennel Club.

Date:______Signature/s_____Applicants for Junior Membership must have a Parent / Guardian Signature

Please return this application to: Elizabeth Crisp Blake SVDFA President 1723 Mariposa Circle Davis, CA 95618

FOR CLUB USE ONLY: Note dates: Date received:

Date read by Board:	
Recommendation: Yes No	
Dates read to Membership: (1)	
(2)	

Thank you for joining us!