

MACON KENNEL CLUB MEMBERSHIP RENEWAL 2020-2021

NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE: _____

\$30 Single Membership _____

\$40 Family Membership _____

Must be paid by September Meeting to be in the MKC Membership Roster. After September 2nd, reinstatement will be required.

By signing below, I agree to follow MKC's By-Laws, Standing Rules & Code of Ethics.

MKC
P.O. Box 13471
Macon, GA 31208