



GOLDEN TRIANGLE IRISH SETTER CLUB MEMBERSHIP APPLICATION

Name: _____

Address: _____

Phone: _____ (home) _____ work) _____ (cell)

E-Mail Address: _____

Birthday: Month _____ Day _____

Membership dues are as follows:

_____ Individual member \$20.00 (Open to all persons 18 years of age and older)

_____ Household \$30.00 (Open to any two related or unrelated adults living in the same household and any minor children, age 10 to 18, residing with them. Children under the age of 18 would not be eligible to vote or hold office as an Officer, Director, or Delegate.

_____ Associate (Individual) \$10.00 This adult cannot vote or hold office as an Officer, Director, or Delegate.

_____ Junior - \$10.00 Open to any person under the age of 18 who wishes to belong yet no other family member from that household will join. This child cannot vote or hold office as an Officer, Director, or Delegate.

As a member of this club, I promise to abide by GTISC's by-laws and to adhere to the Principals of Integrity, which are as follows:

Comply with all Golden Triangle Irish Setter Club Rules and regulations.

Maintain a high standard of health, care, and cleanliness for my dogs.

Act in a sportsmanlike manner and not deliberately degrade other exhibitors/breeders or their dogs.

Make every effort to learn about the structure, anatomy, action, behavior, and other inheritable traits of the Irish Setter.

Attend as many monthly meetings as possible.

Assist in as many events held by GTISC as you can either by providing your manpower and being present, assisting in hospitality or helping with paperwork.

What do you expect to learn, gain or obtain by becoming a member of GTISC?

How long have you owned Irish Setters? Our members are always available to answer any questions, if needed.

Date: _____ Signature _____

Note: You will need to have 2 members sponsor you and have them sign below.

Sponsored by:

_____ (signature) _____ print your name

_____ (signature) _____ print your name

For Membership Committee:

Date application accepted: _____

Date new member accepted: _____

Notes:

Send application to:

Deborah Lawrence
1497 Lynnwood Dr
Hermitage PA 16148