

# NATIONAL BLUETICK COONHOUND ASSOCIATION



## APPLICATION FOR MEMBERSHIP

2018 Calendar Year January thru December

**\*\* Form is incomplete and cannot be considered for membership without all signatures, the application and fees. \*\***

DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ --- Please type or print clearly ---

APPLICANT'S NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ EMAIL-ADDRESS \_\_\_\_\_

CITY: \_\_\_\_\_ ST.: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

TELEPHONE: (\_\_\_\_\_) \_\_\_\_\_ KENNEL NAME:(if applicable) \_\_\_\_\_

OTHER APPLICANTS (LIST JR/ADULT) include separate email for all voting members \_\_\_\_\_

DO YOU NOW OWN A BLUETICK(S)? \_\_\_\_\_ NUMBER OF YEARS IN BLUETICK COONHOUNDS: \_\_\_\_\_ YRS

WHAT OTHER BREEDS DO YOU OWN? \_\_\_\_\_

ARE YOU INTERESTED IN VOLUNTEERING TO HELP ON A COMMITTEE OR FOR AN EVENT? \_\_\_\_\_

WHICH EVENTS ARE YOU INTERESTED IN? CONFORMATION \_\_\_\_ FIELD TRIAL \_\_\_\_ HUNTING \_\_\_\_ WATER RACE \_\_\_\_

AGILITY \_\_\_\_ OBEDIENCE \_\_\_\_ DOCK DIVING \_\_\_\_ BENCH SHOW \_\_\_\_ RALLY \_\_\_\_

TRACKING/SCENT WORK \_\_\_\_ LURE COURSING \_\_\_\_ OTHER \_\_\_\_\_

ARE YOU AN AKC CONFORMATION JUDGE? \_\_\_\_\_ AKC COONHOUND BENCH SHOW JUDGE? \_\_\_\_\_

HAS THE AMERICAN KENNEL CLUB EVER SUSPENDED YOUR PRIVILEGES? \_\_\_\_\_

HAS YOUR MEMBERSHIP IN ANY DOG CLUB OR REGISTRY EVER BEEN REFUSED, REVOKED, OR SUSPENDED? \_\_\_\_\_

PLEASE CHECK ALL THAT APPLY FOR EACH APPLICANT:

Applicant #1 \_\_BREEDER\_\_ EXHIBITOR \_\_ INTERESTED DOG OWNER Applicant #2 \_\_BREEDER\_\_ EXHIBITOR \_\_ INTERESTED DOG OWNER

Applicant #3 \_\_BREEDER\_\_ EXHIBITOR \_\_ INTERESTED DOG OWNER Applicant #4 \_\_BREEDER\_\_ EXHIBITOR \_\_ INTERESTED DOG OWNER

**By signing this application, I hereby apply for membership in the National Bluetick Coonhound Association, and if approved, I agree to abide by its Constitution and By-Laws and the rules of the American Kennel Club. I have enclosed my membership fees made payable to NBCA in U.S. funds for the calendar year.**

Adult Applicant(s) x \_\_\_\_\_ x \_\_\_\_\_

*Type of Membership (Please Circle):			<b>New</b>	<b>Renewal</b>	<b>Reinstatement</b>
<b>Junior (&lt;18)</b>	<b>Regular</b>	<b>Family (2 adults/2 juniors; for any additional person over 4, dues at the regular Junior or Adult rate)</b>			
\$5	\$10	\$20			
<i>Office Use Only:</i>					
Date received: ____/____/____		Amount paid: \$ _____		check # _____ by _____	
				paypal _____	
Ballot Date Approved/Rejected: ____/____/____		Date Notified ____/____/____ by _____			
Further action: _____					

Please Mail Application and Fees To: Kate Chappell

PO Box 450; Goodrich, MI 48438

[emailto: chestnutridgeblueticks@yahoo.com](mailto:chestnutridgeblueticks@yahoo.com)

[Use PayPal: www.paypal.me/NBCAFees](http://www.paypal.me/NBCAFees) or make checks payable to NBCA