

WILLAMETTE AUSTRALIAN SHEPHERD CLUB

MEMBERSHIP APPLICATION

Individual - \$15

Family - \$25

Junior - \$7.50

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email: _____

ASCA® Membership #: _____ Expiration Date: _____

WASC Sponsor(s): _____

Areas of Interest:

Agility Conformation Obedience Tracking

Stock Dog Trials Other: _____

I/We, the applicant(s), agree to abide by the Constitution, Bylaws, Policies, Procedures, Rules, Regulations, Code of Ethics and Dispute Rules of both ASCA and WASC.

Signature of Applicant(s): _____

Please send application and fees to: Willamette Australian Shepherd Club, 38669 Highway 228,
Sweet Home, OR 97386.

Make checks payable to the Willamette Australian Shepherd Club

*Note: Applicants will be notified of acceptance or denial of their application within
30 days of its receipt. In the case of denial, fees will be refunded.*

FOR WASC'S USE ONLY:

Received by: _____ Date: _____ Payment: Cash Check (# _____)