



Tracking Club of Vermont Membership Application

Club Use Only	
1 st . Reading	___ / ___ / ___
2 nd Reading	___ / ___ / ___

Please print or type

Name: _____ Email: _____

Address: _____

Telephone: _____

City/State/Zip: _____ Fax: _____

Kennel Name: _____ Breed: _____

Titles You Have Earned:

Other Dog Clubs to Which You Belong:

Club Committee Experience/Club Related Activity Involvement:

List Other Dog-Related Areas of Interest or Accomplishments:

Tracking Experience and Interests:

If accepted as a member of TCV, what would you most look forward to:

If accepted as a member, I agree to abide by the Constitution and By-Laws of The Tracking Club of Vermont and the rules of the American Kennel Club.

Signature of Applicant: _____

Date: _____

Sponsor: _____

Sponsor: _____

This application must be endorsed by two Tracking Club of Vermont Members. Application will be read at 1st meeting after receipt, 2nd reading at following meeting and then voted on by the membership.

Annual Dues Are:
\$20 single; \$15 single associate; \$25 family; \$20 family associate; \$10 junior

Mail Application and Dues to:
Delia Bort, 97 Killington Ave., Rutland, VT 05701. Email: deliabort97@comcast.net