

New

# NORTH GEORGIA BEAGLE CLUB APPLICATION FOR MEMBERSHIP

Reinstatement

Fee: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
City, State, Zip Occupation: \_\_\_\_\_

If married, Spouse's Name: \_\_\_\_\_

How many beagles do you own that are registered? \_\_\_\_\_

To the best of your ability, are you willing to attend work days, trials, and support all club activities? \_\_\_\_ Are you willing to abide by the constitution and by-laws of the club and rules of the American Kennel Club (AKC)? \_\_\_\_

Give three personal references who have known you at least 1-3 years:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
City, State, Zip

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City, State, Zip

Name two North Georgia Beagle Club Members who are sponsoring you:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Approval by three Board of Directors members required:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_

## Club Use Only

Reading Date: \_\_\_\_\_ Date Voted Upon: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_

Secretary: \_\_\_\_\_