

Membership/Renewal Application

Year(s) \_\_\_\_\_

Term of renewal: 1 year\_\_\_ OR 2 years \_\_\_ OR 3 years \_\_\_

ANNUAL DUES: Individual \$15.00 Family \$20.00

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Town/City \_\_\_\_\_ Province/State \_\_\_\_\_

Postal/Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

email \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Kennel name \_\_\_\_\_ CKC Reg'd? \_\_\_\_\_

CKC #(s) \_\_\_\_\_

Current involvement with Elkhounds B D  
(please circle B=breeding kennel; D=pet owner)

CERTIFICATE OF APPLICANT(S)

I/We hereby apply/re-apply for membership/renewal in the Norwegian Elkhound Club of Canada. If accepted, I/we agree to abide by the Constitution and Bylaws of the Club and of the Canadian Kennel Club.

Date \_\_\_\_\_ Signed \_\_\_\_\_

Signed \_\_\_\_\_

DUES INCLUDED: Annual dues X term of renewal = \$\_\_\_\_\_

Please remit by cheque or money order payable to the Norwegian Elkhound Club of Canada; outside Canada, please remit full fee in U.S. funds.

Please send completed application form and dues to the Treasurer:  
Liz Sykes, 481 Avalon Place, Ottawa ON K1G 4C8 Canada