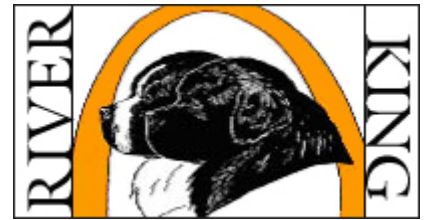


**River King Newfoundland Club
Membership Application**



Name(s):

Address:

City:

State:

Zip:

Phone:

Cell:

Fax:

Email:

Membership Type:

Individual / Associate: \$15.00

Family: \$25.00

Special Interests:

Conformation

Obedience

Water Work

Draft

Other

Please describe any special interests:

Dogs owned and their callnames:

Have you ever been expelled or suffered action by an animal organization? Yes No

If yes, please name club:

- Please explain fully on a separate page.

Why are you interested in joining River King Newfoundland Club?

Are you currently affiliated with any other Newf or all-breed clubs, including NCA?

Yes

No

If "yes," please name club:

RKNC Sponsor Signatures:

X _____

X _____

If accepted for membership, I / We agree to abide by the By-Laws and Code of Ethics of River King Newfoundland Club. I / We also understand that RKNC membership fees include the fiscal year in which they are paid (October 1 through September 30) and will be due and payable each October 1 to remain in good standing with RKNC.

Signed:

Date:

Please return completed form with check included for the appropriate amount payable to RKNC, c/o Lisa Noel, 135 Knox Highway 37, Galesburg, IL 61401