

Kokomo Kennel Club
Kokomo, IN
Application for Membership

Date: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Occupation: _____

Breed(s) Interest: _____

Dog(s): Number _____ Show: _____ Pet: _____ OB: _____

Interested in: Conformation: _____ OB: _____

Are you a Breeder: Yes: _____ No: _____ Show or Pet: _____

Are you in good standing with the AKC? _____

If no, please explain on reverse side.

Are you willing to participate in club activities? Yes _____ No _____

One years dues of \$5.00 must accompany this application. Received on _____

Applicants Signature: _____

Sponsors (two members, not of the same family)

Sponsor # 1: _____

Sponsor # 2: _____

Application presented on _____. If the applicant is not accepted as a club member, the application fee will be refunded.

Action taken/remarks:

