



TIBETAN SPANIEL CLUB OF AMERICA, INC
Membership Application

NAME(s) _____

ADDRESS: _____

PHONE: _____ **OCCUPATION:** _____ **BUSINESSPHONE:** _____

EMAIL ADDRESS: _____ **KENNEL NAME:** _____

How long have you been involved in purebred dogs? _____ **In what capacity?:** _____

How many years in Tibetan Spaniels? _____ **In what capacity?** _____

How many Tibetan Spaniels do you own? _____ **Co-Own:** _____ **How many live with you?** _____

List all the Tibetan Spaniels either owned or co-owned by you (use extra page if necessary):

NAME AKC # SEX DOB CO-OWNER

Name and address of the person from whom you obtained your last Tibetan Spaniel:

What other breed(s) do you own or have you owned in the past? _____

How many litters have your registered in the past 3 years? (all breeds) _____ **Please list:**

DAM SIRE AKC LITTER # DATE WHELPE

What are your areas of interest: Companion:___ Conformation:___ Obedience:___ Breeding:___ Agility:___ Other:___

List all dog club affiliations and any past and present positions held:

Do you exhibit at AKC shows? _____ **How many years have your been showing?** _____

How many shows do you attend in a 12 month period? _____

What contributions do you feel you can make to the club?

Are you affiliated with any kennel, pet show, Humane Society group or grooming shop? _____

Would you be interested in participating in a local Tibetan Spaniel Club? _____

I wish to become a member of the Tibetan Spaniel Club Of America. I agree to abide by the Constitution and By-Laws, Code Of Ethics and Rules of the T. S. C. A. I certify that I am/we are 18 years of age or older.

SIGNATURE: _____ **SIGNATURE:** _____

Executed application along with the 2 signed sponsor forms and a signed copy of the Code Of Ethics must be submitted together with \$50.00 (\$25.00 NON REFUNDABLE processing fee PLUS 1 (one) years dues of \$25.00): spouse and/or additional immediate family members (18 & over) residing in the same household are \$10.00 each. Make checks payable to T.S.C.A. and mail them to:

BONNIE BIEBER
MEMBERSHIP CHAIRPERSON
7 Lennox Drive
Middletown, DE 19709

We have reviewed the above application and accept the responsibility of sponsoring: _____

SPONSOR SIGNATURE: _____ **SPONSOR SIGNATURE:** _____

(2 COMPLETED SPONSORS QUESTIONNAIRES SHOULD BE SUBMITTED SEPARATELY)

APPLICATION MUST BE SIGNED BY BOTH SPONSORS BEFORE IT IS SUBMITTED

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For official TSCA use only:

- 1. Application Received Date: _____ 4. C. O. E Signed? YES NO
- 2. Amount Received: _____ Check # _____ 5. Date Approved by Board: _____
- 3. Published in Newsletter (MM/YY) _____ 6. New member packet sent: _____