



KENAI KENNEL CLUB
P.O. Box 762, Kasilof, AK 99610

APPLICATION FOR MEMBERSHIP
KENAI KENNEL CLUB, INC.

NAME: _____

ADDRESS: _____

OCCUPATION: _____

HOME PHONE: _____ WORK : _____ CELL: _____

NAME(S) OF DOGS: _____

BREED(S) OF DOGS: _____

EMAIL ADDRESS: _____

SPONSORED BY: (1) _____

(2) _____

Dues are \$20 per person or \$30 per couple per year. Jr. Membership \$20.00

I/we herewith enclose \$_____ for annual dues. The fiscal year ends on April 30. All dues are payable at that time.

I/we certify that I/we will abide by the by-laws, rules and decisions of the Kenai Kennel Club, Inc. and the rules of the American Kennel Club. I/we understand that the object of the Kenai Kennel Club, Inc. shall be to further the advancement of all breeds of purebred dogs.

DATE: _____

SIGNATURE(S): _____
