



APPLICATION FOR ASSOCIATE MEMBERSHIP

To the General Membership of Wolverine Dog Training Club:

Enclosed is a \$25.00 for the Initiation Fee:

NAME: _____

ADDRESS: _____

CITY: _____ ZIP: _____

E-MAIL ADDRESS: _____

PHONE NUMBER: _____ CELL NUMBER: _____

BREED OF DOG: _____ CALL NAME: _____

CURRENT TRAINING CLASS AT WDTC: _____

_____ Yes, I have attended one club meeting prior to applying for associate membership.
(This does not include the voting meeting for my membership.)

_____ Yes, I have completed three training classes at WDTC. (documentation attached.)

_____ I understand that I must be present at the membership meeting for the vote for my membership.

_____ I have attached my written sponsorship from an active club member.

Signed: _____ Date: _____

Please present the application and check at the next Club Meeting or mail completed form and check payable to Wolverine Dog Training Club to:

Wolverine Dog Training Club
ATTN: Vice President - Membership
20782 Orchard Lake Rd.
Farmington Hills, MI 48336

FEB 2018