



THE SMOKY MOUNTAINS BULLDOG CLUB

smbc@kornnet.org

http://www.kornnet.org/smbc/index.htm

MEMBERSHIP APPLICATION

Name _____
 Address _____
 City, State, Zip _____
 Telephone: Home _____ Work _____
 Fax _____ E-mail _____
 Spouse Work phone _____

Are you applying as a Full member Associate member* Junior Member*

Do you have other breeds? _____
 Why do you want to become a member of SMBC? _____

Are you Owner Breeder Exhibitor (check all that apply)
 Have you belonged to or do you belong to any other club recognized by AKC? Yes No
 If yes, please list clubs _____
 What offices have you held? _____
 Have you volunteered in any capacity at sanctioned shows or fun matches? _____

As a member of SMBC you may be asked to help in our club activities. Please check those that you would be willing to do.

- | | | | |
|--|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Show or Match Chairperson | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Publicity | <input type="checkbox"/> Rescue committee |
| <input type="checkbox"/> Catalogue | <input type="checkbox"/> Obedience | <input type="checkbox"/> Ring Steward | <input type="checkbox"/> Provide foster home for rescue |
| <input type="checkbox"/> Grounds | <input type="checkbox"/> Training | <input type="checkbox"/> Trophies | |

Other: _____

I (we) hereby make application for membership to the Smoky Mountains Bulldog Club, Inc. and agree to abide by the rules of its Constitution and By-laws.

Signed _____

With this application please submit a check for your dues payable to SMBC.

2005 dues: Individual \$15.00, Family/couple \$25.00
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Sponsored by _____ Sponsored by _____

First Reading Date: _____

*Associate and junior memberships will have all rights and privileges of full memberships with the exception of voting

We ask you to attend a meeting and return this form at that time: Meetings: 1st Tuesday of the month —7 pm Please call 865-688-2270 for meeting location.
