



Application for Membership in the Connecticut Valley Vizsla Club, Inc.

Applicant: _____

Spouse/Partner (if applicable): _____

Address: _____

City/Town: _____ **State:** _____ **Zip Code:** _____

Email: _____ **Website:** _____

Phone: Home _____ Business _____ Cell _____ Fax _____

Type of Membership: Single (\$25.00*) _____ Family (\$30.00*) _____
 (*If applying for membership between January 1 and June 30, the dues amounts are \$12.50 for single membership and \$15.00 for family membership.)

I/we now own _____ Vizslas. # Males _____ # Females _____

If not now, I/we have owned: Breed(s) _____ #Males _____ # Females _____

I/we am/were member(s) in the following animal clubs: _____

My/our interests are: Show ___ Field Trials ___ Hunt Tests ___ Agility ___ Health ___ Pet ___ Rally ___
 Obedience ___ Tracking ___ Rescue ___ Breeding ___ Hunting ___ Therapy ___ Membership ___
 Other _____

I/we am/are willing to serve on these CVVC committees: Show ___ Field Trial ___ Rescue ___
 Health ___ Obedience ___ Hunt Tests ___ Meetings/Programs ___ Membership ___

I/we hereby apply for membership in CVVC, Inc., have obtained the required two sponsors, acknowledge that I/we have read the CVVC Code of Ethics, Constitution and Bylaws, and if approved, I/we agree to abide by such as well as the Rules and Regulations of the American Kennel Club.

_____ Signature of Applicant	_____ Date	_____ Signature of Spouse/Partner	_____ Date
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I/we, member(s) of CVVC, Inc., sponsor the admission of the above applicant(s) to CVVC in the belief that the applicant(s) will abide by the CVVC Code of Ethics, Constitution and Bylaws, as well as the Rules and Regulations of the American Kennel Club.

_____ Signature of Sponsor 1	_____ Date	_____ Signature of Sponsor 2	_____ Date
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_____ Print	_____ Print
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PLEASE RETURN THE COMPLETED APPLICATION AND A CHECK PAYABLE TO CVVC, INC. TO DEBBIE LOOMIS, MEMBERSHIP CHAIRMAN, 235 AMES ROAD, HAMPDEN, MA 01036. If you have any questions, email windyhollow@charter.net or call (413) 566-5733.