



MEMBERSHIP APPLICATION 2010

TALLAHASSEE HUNTING RETRIEVER CLUB, INC.

Annual Membership Fees _____ \$35.00 Working Club Member _____ \$70.00 Non-Working Club Member

Name:		Date:
Spouse Name:		Phone: ()
Address:	City	
	State:	Zip:
E-mail:	Mobile: ()	Fax: ()
Dog Breed(s):		AKC/HRC Registered? <input type="checkbox"/> Yes <input type="checkbox"/> No
Would you like to work? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, check all that apply)</i> _____ Work Day <input type="checkbox"/> Marshal <input type="checkbox"/> Gunner <input type="checkbox"/> Clean-up Tailgate party <input type="checkbox"/> Newsletter <input type="checkbox"/> Web Page Design/Coordinator <input type="checkbox"/> Wherever needed _____		
Interests: <input type="checkbox"/> Hunt test <input type="checkbox"/> Field Trial <input type="checkbox"/> HRC <input type="checkbox"/> Obedience <input type="checkbox"/> Conformation <input type="checkbox"/> Agility <input type="checkbox"/> Tracking <input type="checkbox"/> Other Are you a : <input type="checkbox"/> Breeder <input type="checkbox"/> Judge <input type="checkbox"/> Exhibitor <input type="checkbox"/> Other _____		
This information is for membership renewal for working members. I volunteered or served on the following committees in 20____: _____ _____ _____		
For club use only)	Check #:	Date :

PLEASE COMPLETE if you have more than one address _____ Summer _____ Winter

Name:	E-mail:
Address:	Phone: ()
City:	State: Zip:
May we publish your phone number in our membership directory? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Make check payable to THRC and mail to:

**Jim Branning
6915 Priority Lane
Tallahassee, FL 32311**

_____ hereby agree to abide by the rules and regulations of the American Kennel Club and the by-laws and Constitution of the Tallahassee Hunting Retriever Club, Inc.

I/we the undersigned, hereby agree that the Tallahassee Hunting Retriever Club and owner, shall not be held responsible for any injury that I or my dog might receive while training on Borderline/Springhill Plantation or being trained by the Tallahassee Hunting Retriever Club, and further agree to pay for any injury or damage that my dog may do to the other animals or persons or property while on Borderline/Springhill Plantation.

Signature of Applicant: _____

Signature of witness: _____

Name of Sponsor* _____

*Sponsor required for new members. Renewals do not need a sponsor.