

WHATCOM AGILITY TEAM

Membership Application

I am applying for membership in Whatcom Agility Team, and as a member, I promise to further the mission of the club to promote the sport of dog agility and responsible dog ownership.

Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

E – mail: _____

Work Telephone (optional – if you can be contacted at work): _____

If you can be contacted at work – best time to call _____

Dog's Name: _____

Dog's Age: _____

Breed (for information only): _____

(List information for additional dogs on back)

I understand that to be considered for membership in Whatcom Agility Team, I must attend two club meetings and participate in at least one club activity (i.e. a set of classes, a play day, help at a demonstration, etc.). I must also be sponsored by an active club member in good standing.

Signature/Date: _____

Dates of meetings attended: _____

Activity Participated in: _____

Signature of Sponsoring Member: _____

Sponsoring Member (print name): _____

Signature of Sponsoring Member: _____

Sponsoring Member (print name): _____