

Vizsla Club of Michigan Membership Application/Renewal

Name:		
Names of family members included in membership:		
Address:		
City:	State:	ZIP:
Phone:	E-Mail:	
Cell:	Website:	
Number of Vizslas Owned:	Kennel Name:	
<p>By applying for/renewing my/our membership in the Vizsla Club of Michigan., I/we agree to:</p> <ul style="list-style-type: none"> • Support the Constitution and By-Laws of the VCM • Abide by the rules of the American Kennel Club and other sanctioning entities of VCM events • Encourage high standards in breeding, training, and showing of Vizslas, • Promote the welfare of the Vizsla breed <p>Membership in the VCM entitles me/us to a voice in all club matters and club elections and to delivery of The Vizsla Vehicle (VCM Newsletter) to the above listed address. It is my/our responsibility to inform the VCM Membership Chair of any information updates.</p>		
<p>Volunteer Interests: (check all that apply)</p> <p> <input type="checkbox"/> Field Trials <input type="checkbox"/> Hunt Tests <input type="checkbox"/> Specialty Show/Supported Entry <input type="checkbox"/> Fun Days <input type="checkbox"/> Training Days <input type="checkbox"/> Education <input type="checkbox"/> Promotion (Sports Shows & Pet Fairs) </p>		
<p> <input type="checkbox"/> Single Membership (1 Vote) \$20* <input type="checkbox"/> Extra VCM Patch \$6 <input type="checkbox"/> Family Membership (2 Votes) \$25* <input type="checkbox"/> Receive a Printed Copy of Michigan Out-of-Doors Magazine \$20 *Membership includes MUCC Membership (in addition to Membership dues) </p>		
Signature of Applicant:		Date:
Signature of Spouse/Partner:		Date:
Name of VCM Sponsor:	Sponsors Signature:	
<p>Send form with check payable to Vizsla Club of Michigan to: VCM Membership c/o Judy Fales 901 North 11 Mile Rd Linwood, MI 48634</p>		<p>Membership Chair use only: Date Received: Check #</p>