



Companion Dog Club

of Omaha and Council Bluffs

dba Companion Dog Club Partners

10803 N. 72nd Street, Omaha, NE 68122

(402) 572-7276

Club Use Only

Date Pd. ___/___/___

Amt. Pd. \$ _____

Voted on ___/___/___

Application for Membership

Date Submitted _____

Regular Family Junior (check one)

Name _____ Phone _____

(Additional applicants on the back please)

Address _____ City & State _____ Zip _____

E-mail Address _____

Dog Breed(s) _____ Has your dog(s) earned any titles? _____

If so, please list them: _____

Applicants shall apply for a **Regular**, **Family**, or **Junior** membership. New members must be approved by 3/4 of the members present at any regular or special meeting. The Board of Directors may also approve applications by mail, e-mail, or the next board meeting.

Regular: Regular members must be 18 years of age or older and shall enjoy all the privileges of the Club, including the right to vote and purchase a Trainer's Pass.

Family: A family membership shall consist of two regular memberships for two individuals residing in the same household at one and a half the cost of a regular membership. Both members must meet regular membership requirements.

Junior: Junior members must be 18 years or under and be sponsored by a parent or legal guardian. Junior members shall enjoy all the rights and privileges of the Club, except the right to vote.

Reason for wanting to join CDC and your specific interests (example: obedience, rally, agility, flyball, hunting)

Other or previous dog club affiliations _____

As a Club member, you will be expected to abide by the rules of this Club. The success of the Club is dependent on the participation of its members.

There are a variety of activities available. Please check the ones you are most interested in helping with or can provide: Serve on committee(s)

(Shows, Programs, Publicity, etc.) Steward/help at Agility trials

Assist trainers of beginner or puppy classes

Newsletter editor

Assist with demonstrations and show & go's

Steward/help at the UKC show

Provide food for events

Teach a class

Donate paper goods or cleaning items

Building maintenance & cleaning

Fund raising

Van/truck availability

Social events

other _____

Please list any special skills (such as woodworking, sewing, photography, artistic, etc.) that you can offer to the club?

Sponsors: Both sponsors must be CDC regular members; one may be your beginner instructor.

Sponsor's Signature: _____ Date: _____

How known & how long? _____

Sponsor's Signature: _____ Date: _____

How known & how long? _____

Club/School where you took a beginner class _____

Trainer of the beginner class _____

Membership Application

Amount attached (Regular, Family, and/or Junior)

_____ Annual membership dues (see chart below) Regular \$_____, Family \$_____, Junior \$_____

_____ **Total attached. (Full payment shall accompany application, but will be returned, if rejected.)**

Pro-rated Membership Dues for New Members

Memberships are pro-rated. January 1st through June 30th full payment is due. July 1st through December 31st half payment is due.

	Regular	Family	Junior
Payment for Full Year (Paid January 1 to June 30):	\$30.00	\$45.00	\$15.00
Payment for Partial Year (Paid July 1 to December 31):	\$15.00	\$22.50	\$7.50

Additional applicants and membership types (please type or print the name of applicant & check the type of membership)

- Regular Junior _____

I hereby waive and release *Companion Dog Club* (CDC) also dba *Companion Dog Club Partners* (CDCP) and any agents from any and all liability of any nature for injury or damage which I or my dog may suffer, including specifically, but without limitation, any injury resulting from the action of any dog, and expressly assume the risk of such damage or injury while participating in any training session or other function at the training site, or on the grounds or the surrounding area thereto. Additionally, I also agree to abide by the rules and regulations of the aforementioned club(s). I have carefully read this agreement and I understand that this is a release of liability and a contract between CDC/CDCP and its members and myself and I have signed it of my own free will.

Signature(s) of Applicant(s)

Date _____

Please sign above and mail this completed application with payment to:

Companion Dog Club
ATTN: Membership Chair
10803 N 72nd St,
Omaha, NE 68122

(Make checks payable to: *Companion Dog Club*)