



# Shiba Inu Canada

Membership Application for the year \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Kennel Name: (if any) \_\_\_\_\_

CKC # (optional): \_\_\_\_\_ Tattoo Combination (optional): \_\_\_\_\_

Membership  Single \$30.00 (Voting)  Single (2 year) \$50.00 (Voting)

List breed(s) of dogs owned, bred or shown (give some details):

\_\_\_\_\_  
\_\_\_\_\_

List all dog clubs and organizations you are affiliated with (and position held, if any):

\_\_\_\_\_  
\_\_\_\_\_

Check all that apply:

Breeder  Pet Owner  Judge  Handler  Other \_\_\_\_\_

Have you ever been suspended from the CKC or denied membership to any breed club? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

What goals would you like to see the Club aspire to?

Long-term: \_\_\_\_\_

Short-term: \_\_\_\_\_

In what areas could you assist the Club? (ie newsletter, rescue, public displays, shows)

\_\_\_\_\_  
\_\_\_\_\_

By signing below, I hereby agree to abide by the Constitution and By-laws of Shiba Inu Canada.

\_\_\_\_\_  
signature

\_\_\_\_\_  
date

Return to: Shiba Inu Canada 146 Tuscany Ridge Close NW Calgary AB T3L 2K6