



**CAVALIER KING CHARLES SPANIEL CLUB OF PUGET SOUND
JUNIOR MEMBERSHIP APPLICATION**

Junior Membership is open to all minors under 18 years of age; who are interested in Cavalier King Charles Spaniels. Junior Members shall be entitled to all privileges of the Club except that they shall not be permitted to vote, advertise on the breeder referral list, hold office, or be counted in a quorum. A Junior member may apply for Associate Membership after a minimum of one year of membership and having attained the age of 18.

Please type or print

Name_____

Address_____

City_____ **State**_____ **Zip**_____

Home Phone_____ **Cell Phone**_____

Email_____

What COPS members or Cavalier owners to you know?_____

Do you own a Cavalier?_____ **When did you first acquire a Cavalier?**_____

From Whom?_____

If you Exhibit, when did you start?_____

Have you ever been suspended from the privileges of any dog club, or the AKC?_____ **If "Yes", state the name(s) of the club(s), the dates and circumstances:**

List all AKC recognized Kennel Clubs, Specialty or Obedience Clubs to which you belong and indicate dates of membership, positions held and term of each:

What areas of interest in Club work do you have?_____

List other breeds you have kept, bred, or shown:

Average # of dogs you keep? _____

Average number of litters whelped in the past year and breeds: _____

Are you currently an AKC approved judge? _____ What breeds/groups _____

By signing this application, the applicant agrees to abide by the By-Laws and Standing Rules of the Cavalier King Charles Spaniel Club of Puget Sound, and the rules of the American Kennel Club; acting always in the best interest of the Club and purebred dogs. Furthermore, the applicant agrees to update any information required by the Club upon request. This application is accepted subject to the approval of the Regular Members of the Club by majority vote. Should the application be denied, the Club is under no obligation to make known the reasons. I hereby understand and agree to the terms and conditions of this application.

Signature of Applicant _____ Date _____

Dues are \$10.00 per person per year. Dues must accompany this application.
Checks made payable to COPS. Return application and dues to:
Susan Benton, 12833 N.E. 91st Street, Kirkland, WA 98033

(For Club Use Only)

Received _____ Initial Ltr Mailed _____ Ck To Treasurer _____ Amt\$ _____

1st Reading _____ 2nd Reading _____ Voting Ltr Mailed _____

3rd Reading & Vote: _____ Results Letter/Packet Mailed _____