

Evergreen Shiba Inu Club



Membership Application

I hereby make application for membership in the Evergreen Shiba Inu club. I agree to abide by the Constitution and By-Laws and Code of Ethics of this club.

Name: _____

Address: _____

City: _____

Phone _____ Kennel Name (if any) _____

Breeds owned:

Other Breed Clubs you belong to: _____

Have you ever been suspended by AKC or been subjected to discipline by a Breed Club?
___No ___Yes Please explain if Yes: _____

Applicant's signature (s)

Date: _____

Membership Sponsor _____

Club Officer Sponsor _____

Annual Dues: **Individual \$15.00 Family: \$20.00**

Submit application and fee to: Laura Perkinson, Secretary,
Evergreen Shiba Inu Club
86 Cedar Ridge Lane
Oakville, WA 98568
Phone: 360 273-5818

Make Checks Payable to: **Evergreen Shiba Inu Club**

General Membership Vote: For _____ Against _____

Accepted: _____ Rejected _____ Date: _____

Reason for
Rejection: _____
