The Great Dane Club of Maryland, Inc.

Application for Membership



Name of applicant

 

Telephone (indicate if home/cell/work) Email



Name of second applicant (for household memberships)

 

Telephone (indicate if home/cell/work) Email



Address

  

City State Zip Code

Please tell us something about yourself and your interest in Great Danes:

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What other clubs have you belonged to or belong to currently? Did you hold any offices?

**Please print/sign and bring to the next meeting.**

Regular members are required to offer a minimum of one class trophy at each Annual April Specialty Show and work at a minimum of one club event/one day during each fiscal year.

Dues: Single Membership - $20.00 per year (includes $5.00 to the Great Dane Club of America).

Household (2 people) - $30.00 per year (includes $10.00 to the Great Dane Club of America).

Prospective members must attend two business meetings prior to submitting an application (in duplicate). The application may be submitted at the second meeting. The meetings attended must be within a period of a year and a half. Dues must be submitted with the application.

I / We, the undersigned, hereby apply for membership in The Great Dane Club of Maryland and agree, if accepted, to abide by the Club's Constitution and By-Laws and Code of Conduct.

I / We have attended the following business meetings **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of second applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Sponsors (2 required – determined at the meeting) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEMBERSHIP COMMITTEE REPORT**

Dates Listed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Approved \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Chairperson, Membership Committee

Dues Received\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Date) (Cash / Check) (Amount)

Attest:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Treasurer

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