

United States of America Coton de Tulear Club Inc.  
2018 "New" Membership Application

Please fill out the form below. A Membership Roster will be provided (one time only per year) to those who request one. This information will appear in the 2018 USACTC, Inc. Membership Roster, unless you request to have your name removed from the roster. (does not exclude membership list reported to AKC.)

Date:

Check if you want your name listed on the USACTC, Inc., Membership Roster

Check if you want your name removed from the USACTC, Inc., Membership Roster.

Select if you own a Coton

Select Membership Type

|                                 |                                 |                                  |                                         |                                    |                                         |
|---------------------------------|---------------------------------|----------------------------------|-----------------------------------------|------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Single | <input type="checkbox"/> Family | <input type="checkbox"/> Foreign | <input type="checkbox"/> Foreign Family | <input type="checkbox"/> Sponsored | <input type="checkbox"/> Jr. Membership |
|---------------------------------|---------------------------------|----------------------------------|-----------------------------------------|------------------------------------|-----------------------------------------|

Name:

Street Address:

City: State: ZIP Code:

Home Ph# Cell # Email:

Occupation:

Sponsor Name:

Email: Phone

Sponsor Name:

Email: Phone

PLEASE CHECK YOUR AREA(S) OF PARTICIPATION

|                                       |                                   |                                  |
|---------------------------------------|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Agility      | <input type="checkbox"/> Herding  | <input type="checkbox"/> Rally   |
| <input type="checkbox"/> Conformation | <input type="checkbox"/> Tracking | <input type="checkbox"/> Rescue  |
| <input type="checkbox"/> Obedience    | <input type="checkbox"/> Service  | <input type="checkbox"/> Therapy |

Members enjoys all club privileges including the right to vote and hold office **AMOUNT**

(USA) Individual Membership = \$30 \$

(USA) Household Membership = \$45 \$

Members shall enjoy all club privileges **except** voting and office holding

Foreign Membership: Single (\$30) Family (\$45) Sponsored (\$30) Jr. (\$ 15) \$

Select one **(required)**

I or (we) agree to receive all club communication & balloting electronically \$

I or (we) wish to receive all club communication & balloting via USPS. I understand and agree to pay an additional postal fee charge. **(add \$15.00)** \$

Non- Deductible Donations

Rescue  Health  National Specialty Total Donations: \$

Check # (U.S. Currency only) **Total Payment Due :** \$

**Payable to:** USACTC, Inc., Treasurer

**Mail to:** Diane Rinella 31622 Via Cruzada, San Juan Capistrano, CA 92675

By signing, I have read and agree to abide by the current USACTC, Inc. [Code of Ethics, Constitution and Bylaws](#), and the rules of The American Kennel Club.

**SIGNATURE** (Single or 1st Family Member)

**SIGNATURE** (Household - 2<sup>nd</sup> Family Member)