



# Canaan Dog Club of America, Inc.

## Membership Renewal

FOR OFFICE USE ONLY:  
Check # \_\_\_\_\_ Dated: \_\_\_\_\_

Sign and return this form, along with dues payable to CDCA to:

**AMY PRESTON 81 COUNTY HOME ROAD THOMPSON CT 06277**

OR

Mail signed, completed form to address above and submit dues via PayPal to [Treasurer@CDCA.org](mailto:Treasurer@CDCA.org) Please send a copy of your PayPal receipt to the Membership Chair.

Contact the Membership Chair at [Membership@CDCA.org](mailto:Membership@CDCA.org) with any questions.

**This form is being submitted as:**

- Renewal - Associate Member (Associate Members do not vote or hold office.)  
*Note: If you are an Associate Member eligible to become a Full Member, please include endorsing statements and signatures from two full members in good standing.*
- Renewal - Full Member

Type	Single	Household
<input type="checkbox"/> Domestic <input type="checkbox"/> International <sup>1</sup>	_____ \$30 1 year _____ \$60 2 years _____ \$90 3 years	_____ \$35 1 year _____ \$70 2 years _____ \$105 3 years
I have included additional funds for:	\$ _____ Health & Genetics	\$ _____ Canaan Dog Rescue <sup>2</sup>

<sup>1</sup> International members receive the newsletter in electronic format only.

<sup>2</sup> Please send a separate check for donations payable to CDRN.

**Contact information:**

**First Member**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Address 1 \_\_\_\_\_  
 Address 2 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Country \_\_\_\_\_ Email \_\_\_\_\_  
 Phones: Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

**Second Member** (For household membership only)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phones: Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

**Occupation:**

Member 1: \_\_\_\_\_ Member 2: \_\_\_\_\_

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

**Signatures:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*By signing this membership renewal, member(s) agree(s) to follow and uphold the Constitution, By-Laws and Code of Ethics (signed copy on file for every member) of the Canaan Dog Club of America, Inc.*

**Please take a moment to update your information.**

**Member Profile**

A. Please check all of the following that apply.

- |                                  |   |
|----------------------------------|---|
| <input type="checkbox"/> Owner   | <input type="checkbox"/> Professional Handler |
| <input type="checkbox"/> Breeder | <input type="checkbox"/> Professional Trainer |
| <input type="checkbox"/> Judge   | <input type="checkbox"/> Fancier              |
- \_\_\_\_\_

B. Interests

- |  |                                       |                                      |
|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Agility             | <input type="checkbox"/> Companion    | <input type="checkbox"/> Obedience   |
| <input type="checkbox"/> Breed promotion     | <input type="checkbox"/> Conformation | <input type="checkbox"/> Tracking    |
| <input type="checkbox"/> Breeding            | <input type="checkbox"/> Free style   | <input type="checkbox"/> Rescue      |
| <input type="checkbox"/> Canine Good Citizen | <input type="checkbox"/> Herding      | <input type="checkbox"/> Other _____ |

C. Newsletter

- Check here if you want to receive the *Canaan Kibitzer* via email in PDF format.

D. Being an Active Club Member

1. Do you have any skills/interests that might be helpful to the Club (fund raising, web design, artist, writing, etc.) Please list.

\_\_\_\_\_

2. Are you interested in any of the following positions within the Club? Check all that apply, if a position becomes available, we will contact you.

- |   |   |
|---|---|
| <input type="checkbox"/> Advertising        | <input type="checkbox"/> National Specialty                 |
| <input type="checkbox"/> Awards             | <input type="checkbox"/> Show Chair                         |
| <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Other (Trophies, Hospitality, etc) |
| <input type="checkbox"/> Breeder Referral   | <input type="checkbox"/> Newsletter                         |
| <input type="checkbox"/> Courtesy           | <input type="checkbox"/> Performance / Agility              |
| <input type="checkbox"/> Gazette            | <input type="checkbox"/> Public Education                   |
| <input type="checkbox"/> Health             | <input type="checkbox"/> Rescue                             |
| <input type="checkbox"/> Herding            | <input type="checkbox"/> Versatility / Register of Merit    |
| <input type="checkbox"/> Judge Education    | <input type="checkbox"/> Web                                |
| <input type="checkbox"/> Membership         |   |
- I am not interested in being active in the Club*

E. Have you ever been the subject of disciplinary proceedings by any canine club or organization? If yes, please describe:

\_\_\_\_\_





# Canaan Dog Club of America, Inc.

## Membership Renewal

### Endorsements & Signatures

**Attention CDCA Member(s) endorsing this application:** you must provide a brief summary why this application should be considered for membership, please use back if more space is needed:

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Endorser name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Attention CDCA Member(s) endorsing this application:** you must provide a brief summary why this application should be considered for membership, please use back if more space is needed:

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Endorser name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Application for Full Membership (Must have been an associate member for one full year) *Note: This application must include endorsing signatures and statements from two full members in good standing, from separate households.*