



Berks County Dog Training Club

Membership Application

Members of the Berks County Dog Training Club indicate by their actions that the interest and general welfare of dogs and the club are foremost in their actions.

NAME of person joining club: _____

(Additional household members wishing to join must fill out a separate application and pay a separate \$105 fee)

ADDRESS _____

(CITY) (ZIP)

PHONE NUMBER _____ (DAY) _____ (EVENING)

E-MAIL _____

Your newsletter will be delivered electronically, unless you indicate otherwise. _____

Breed of dog: _____

Where or with whom you have previously trained?: _____

SIGNATURE _____ DATE _____

By signing this form, I certify that my dog(s) has (have) current rabies inoculation.

To become a member of the BCDTC, you and your dog will need to be evaluated by one of our instructors. Please contact Carol Sutphin at 610-779-8778 or sutphincl@gmail.com to arrange an evaluation. Your evaluator will sign this form verifying that you have been accepted. If your evaluation is not deemed satisfactory, you will be referred to attend our next basic skills class.

Total due is \$105 per training member. (Yearly membership renewals are currently \$55)

After you have been evaluated, please *make a check payable* to **BCDTC** and mail it with this application to **Carol Sutphin, Financial Secretary**, 260 Hartman Road Reading PA 19606.

After receipt of your check honored by BCDTC, you will receive your membership card and a copy of our bylaws.

EVALUATOR'S SIGNATURE

The following will be filled out by the BCDTC.

CK # _____ AMOUNT \$ _____ DATE RECEIVED _____