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# CALIFORNIA BRITTANY CLUB MEMBERSHIP APPLICATION

Date: \_\_\_\_\_ Select one:    New Membership    Renewal

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Application for New Membership, Renewals and Address Changes  
(Look on the mailing label for your membership expiration date.)  
Please print clearly

I, \_\_\_\_\_ am enclosing dues  
in the amount of (check an amount)

**Full Membership**    \$30.00 (one year)    \$60.00 (2 years)    \$90.00 (3 years)

**Associate Membership**    \$3.00 per year (open to immediate family member of a full active member)

Send your membership to:

**Joy Ory, 28930 Shadow Valley Ln, Santa Clarita, CA 91390-1283**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_    Zip+4: \_\_\_\_\_

Home Phone: (    ) \_\_\_\_\_

Work Phone: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

**Interests:** (check all that apply)

- Field Trials    Conformation    Hunt Tests    Hunting    Obedience    Agility  
 Other \_\_\_\_\_

\* Check the box to be excluded from the club directory.    YES exclude me

\* May we notify you via email of club meetings, events and newsletters?    YES    NO

\* How did you hear about the California Brittany Club? \_\_\_\_\_

I agree to abide by the rules and regulations of the American Kennel Club, the by-laws of the American Brittany Club and the by-laws of the California Brittany Club.

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