

Idaho Capital City Kennel Club

Name of applicant: _____ Date _____

Address _____

Phone: _____ Email _____

Occupation _____

Areas of interest: Conformation _____ Obedience _____ Rally _____ Agility _____ Breeding _____ Tracking _____

Barn Hunt _____ Scent Work _____ Other _____

Experience w/ dogs: Breeds owned, past & present _____

Length of time each breed _____

Number of litters bred in past 5 years _____

Purpose of breeding _____

Briefly describe your screening process for puppy applicants _____

Experience with dog shows: titles earned and dates _____

Number of dogs with points, or companion event or performance legs _____

Show/Match Judge Yes ___ No ___ Steward Yes ___ No ___ Committee Member Yes ___ No ___

Where? _____

Experience with dog clubs: Membership(s) in other all-breed, specialty, obedience or agility clubs _____

Offices held _____

What does ICCKC membership offer you? _____

What will you offer ICCKC? _____

Please be aware that ICCKC is a working club. Members will be called upon to help with and participate in, club activities. I certify that the above information is correct and that I'm in good standing with the American Kennel Club. I understand that membership in ICCKC will be denied if false information is submitted on this application.

Signature _____ Date _____

For ICCKC use only: Date application received _____ Date of first reading _____

Date of Courier publication _____ Date Board notified _____

Date of BOD recommendation _____ Date of Election _____