



**SWAMP DOG CLUB
NEW MEMBER APPLICATION**

\$25.00/ ADDRESS

Payable January 1st

Mail to: Frank Orlando; 1209 Rapps Dam Rd.; Phoenixville, Pa. 19460-4806

NAME: _____

ADDRESS: _____

PHONE: (Include area code): _____

EMAIL: _____

BREED of DOG: _____

WHAT AREA OF RETRIEVER TRAINING ARE YOU INTERESTED IN?

Field Trials _____

WC/ WCX _____

Hunt Tests _____

Gun Dog _____

I (We) wish to join the Swamp Dog Club (SDRC), and agree to abide by the constitution and by- laws of SDRC and the rules of the American Kennel Club.

Signature of Applicant (s): _____

Signature of Sponsor: _____