

Miniature American Shepherds of Canada

APPLICATION FOR MEMBERSHIP

MASCAN Membership year is 1 January to 31 December

□ Ne	□ New Membership □ Renewal							
Full name(s):								
Address:								
Type of Membership:								
☐ Single Membership 1 year, \$10 (1 vote for CDN resident over 18yo)	☐ Family Membership 1 year, \$15 (2 votes for CDN residents over 18yo)							
☐ Single Membership 3 years, \$27 (1 vote for CDN resident over 18yo)	☐ Family Membership 3 years, \$40.50 (2 votes for CDN residents over 18yo)							
☐ New Puppy Owner (Breeder's Litter Package)								
Kennel Listing (for Breeders):								
☐ Kennel Listing 1 year, \$20	☐ Kennel Listing 3 years, \$54							
Breeder Members can fill out our Breede strictly confidential and is optional, for me	r Information on Page 3. All information is kept embership registry only.							
Payment Method (in Canadian Funds)	:							
☐ Email Transfer sent to canadaminian	nericanshepherds@gmail.com							
☐ Credit Card (+4% processing charge address listed above to complete payments	will apply) – you will be sent an invoice to email nt							
Please contact us to arrange alternative works for you.	payment options if neither of the above options							

Sp	ecial Interests:								
	Disc/Freestyle		Agility			Obedience			
	Rally-O		Flyball			Tracking			
	Conformation		Herding			Scent Detection			
Are	you interested in worki	ng d	on club commi	ttees	?				
	Yes			No					
Are	you a member of the Ca	anad	dian Kennel Cl	ub (C	KC)?				
	Yes			No					
MASCAN Bylaws as set forth at: https://miniatureamericanshepherdsofcanada.com/code of-ethics and https://miniatureamericanshepherdsofcanada.com/by-laws . I also agree to permit the information supplied on this form to be used by MASCAN in its normal course of operation. This information will not be sold nor disclosed outside of the MASCAN Membership. Membership in the club is non-transferable, and membership dues are non refundable (as stated in the Bylaws section 3, subsection f). I agree to the above statement.									
Sig	nature				Date				
You	u may email completed for	m to	o: <u>canadaminia</u> i	<u>nerica</u>	anshephe	rds@gmail.com			
MA P.C Sha	u may mail completed form ly More SCAN Membership Direct D. Box 144 awville, Quebec K 2Y0								



BREEDER MEMBER INFORMATION

Breeder:											
Kennel N	ame:										
Website:											
The following information is not required, however, it is appreciated, and will be kept confidential and used for statistical purposes only.											
is nealth	testing part of your breeding progr	am?		☐ Yes	Ц	No					
Please check the following certification or genetic tests routinely done:											
□ OFA	OVC/PennHip		CEF	RF/CAER							
□ PRA			НС								
□ MDR1			DM								
□ CEA			Oth	er:							
AKC or CKC Registration Numbers of dogs in your program:											
Sex	Number	Sex		Number							