

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:								
Email(s):								
Phone #(s):								
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	(= 15.55 15. 5 = 15.55 = 15.55)							
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 poorks 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 working on club committees?									
	Yes			No					
Are you a member of the Canadian Kennel Club (CKC)?									
	Yes			No					
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>canadaminiar</u>	nericar	nshephe	rds@gmail.com			
Kel MA P.C Sha	u may mail completed form ly More SCAN Membership Direct D. Box 144 awville, Quebec (2Y0								



BREEDER MEMBER INFORMATION

Breeder:						
	lame:					
Website:						
	wing information is not required, he ial and used for statistical purpose		•	s appreciated, and	∣will b	e kept
Is health	testing part of your breeding progr	am?		□ Yes		No
Please cl	heck the following certification or g	enetic	: test	s routinely done:		
☐ OFA/OVC/PennHip			CEI	RF/CAER		
□ PRA			НС			
□ MDR	.1		DM			
□ CEA			Oth	er:		
AKC or C	CKC Registration Numbers of dogs	in yo	ur pr	ogram:		
Sex	Number	Sex		Number		