

## THE BERNESE MOUNTAIN DOG CLUB OF SOUTHERN CALIFORNIA MEMBERSHIP APPLICATION

(PLEASE PRINT OR TYPE)

Member Name: #1:			#2:					
			#2:					
Address: _								
When did yo	ou first acquire yo	ur BMD?						
Did you acq	uire your BMD for	: (please circle all th	nat apply)					
PET	COMPANION	BREEDING	OBEDIENCE CONFORMATION					
Have you be	een a breeder in t	he last 5 years?	Which breeds?	·				
Your kenne	I name:	Nu	mber of litters you who	elped in the last 3 years?				
Within the la	ast 3 years, have y	you exhibited your d	og(s) in: (please circle	all that apply)				
PEF	RFORMANCE	CONFORMAT	ION TRACKI	NG DRAFTING				
Please list a	any AKC champio	nship or performanc	e titles that you have	completed:				
Average nu	mber of dogs kept	by you: List	other breeds you kee	ep or have kept, bred, or shown:				
List all other	r kennel, specialty	, or obedience clubs	s to which you belong	or have belonged, and indicate				
the dates of	membership and	positions held:						
BERNESE I	MOUNTAIN DOG	CURRENTLY OWN	JED (Please list addition	al BMDs on a separate sheet)				
			•	,				
* If you are	not familiar with B	ernerGarde, or your	dog doesn't have a E	BernerGarde #, may we ? Yes No				

Please circle areas	of interest:	Conformation	Obedience	Agility	Rally	Tracking	Scent Work			
Draft/Carting Bre	eding Ca	re/Feeding T	herapy Oth	ner (specif	y)					
In the space provide	ed below, ex	plain why you v	wish to join the	e BMDCS	C and ho	ow you beca	ame interested			
in Bernese Mountain Dogs:										
With a view to the I	hottorment o		REE AND SIG		co Moun	atain Dog I	agrae to abide			
by the rules and	regulations o		Kennel Club,	Constitut	ion and I					
Applicant #1 Signat		Date:								
Applicant #2 Signat		Date:								
		ANNULAL	MEMBERCHI	D EEEC						
ANNUAL MEMBERSHIP FEES  • 1st Adult Member										
Additional Adult Members (same household) or Junior (under 18) \$20.00										
If joining after August 1st: 1st adult member is \$20.00, Junior or additional adult members (same household) \$20.00 for the remainder of the club year.										
If joining		ber 1 <sup>st</sup> ; the app					rear.			
Places return this S	SIGNED ADD		A SIGNED CO		ONDITO.	Taaanam	acil attachment			
Please return this SIGNED <u>APPLICATION</u> and SIGNED <u>CODE OF CONDUCT</u> as an e-mail attachment to <u>pattialambert@gmail.com</u> or mail to BMDCSC c/o Patti Lambert; 711 Goldenrod Ave; Corona Del										
Mar, CA 92625. Questions please call Patti @ 949-887-7772.										
Payments can be made via Zelle using <a href="mailto:bmdcsctreasurer@gmail.com">bmdcsctreasurer@gmail.com</a> or the QR code to the right										
PayPal using the QR code to the left, or the link on the						bsite,				
QR Code to PayPal A	or send a c	neck.					Zelle QR Code			
QN Code to Payral A	<u>.</u>						Zelle QN Code			
			Board Use Oi							
Payment Means:					•					
Check #:										
COC Received: Sent to Berner Ta										
Sent to Board: Payment Deposi										
Board Approval: Approved/Date										