

PROVIDENCE COUNTY KENNEL CLUB | Membership Application

Name _____

Street address _____

Town _____ State _____ Zip _____

Day phone _____ Eve phone _____

Cell _____

All club communications will be disseminated by email.

Email (print clearly) _____

Breed/s _____

Kennel name _____

Participation in Conformation Obedience Rally Agility Other _____

All PCKC members are required to work on or at club events. Please indicate your areas of interest.

Hospitality Stewarding (training and a mentor will be provided) in Conformation Obedience

Vendor acquisition Trophy donations Willing to work on whatever is needed

Send this completed form, with a check for \$25 payable to Providence County Kennel Club, to:
Grace Wilkinson, 151 Promenade Street, Barrington RI 02806 | cliffwalkecs@gmail.com

Applicant signature: _____ Date: _____

First Endorser signature: _____ Date: _____

Second Endorser signature: _____ Date: _____

ADMINISTRATIVE USE ONLY:

Date of Board recommendation: _____

Date of membership approval: _____