**MEMBERSHIP APPLICATION**

**Please check the type of membership you are applying for:**

**Associate Membership:**

**Pet Family Membership:**

**Non-Resident Membership:**

**Guest Membership:**

**Name(s):** Click here to enter text.

**Address:** Click here to enter text.

**City/Town:** Click here to enter text.

**Province:** Click here to enter text. **Postal Code:** Click here to enter text.

**Phone:** Click here to enter text.

**E-Mail:** Click here to enter text. **Website:** Click here to enter text.

**Kennel Name:** Click here to enter text. **CKC#:** Click here to enter text.

**Permission is granted to publish personal information on the members list in the password protected members section on the Pug Club of Canada (PCC) Website:**

**Yes  No**

**Please check information to be published:**

**Name(s)  Address  Phone  Fax  E-mail  Website**

**Have you been suspended from the privileges of the Canadian Kennel Club (CKC) or any CKC recognized Club in the past 12 months?**

**Yes  No  If Yes, when and why?** Click here to enter text.

**Briefly Describe your interest in Pugs and reasons for seeking membership with the PCC:** Click here to enter text.

**How would you like to receive your PCC Newsletter?**

**Regular Mail  E-mail  Download from Website**

**Do you own a Pug, if so how many?** Click here to enter text.

**Do you breed Pugs, if so what is your Kennel Name?** Click here to enter text.

**Do you exhibit, if so check all that apply:**

**Conformation:  Obedience:  Other:** Click here to enter text.

**The PCC is always looking for Members to help you with PCC activities. Please check any of the areas in which you would be willing to assist:**

**Breed Standard  Publicity, Program and Education  Rescue**

**Health/Genetics  Obedience/Performance Newsletter**

**Other: (please specify)** Click here to enter text.

**Annual Membership Dues please check all that apply:**

**Associate Membership: Single $25.00  Family $37.50**

**Pet Family Membership: Single $25.00  Family $37.50**

**Non-Resident Membership: Single $25.00  Family $37.50**

**Guest Membership: Free**

**Please consider supporting your Rescue & Trophy Fund with a donation**

**Pug Rescue: $**Click here to enter text. **Trophy Fund: $**Click here to enter text.

**Breeder Ad (Regular Members Only) $10.00**

**Total remittance is: $**Click here to enter text.

**Please provide two references not related to you, one of which must be a Regular Member of the PCC (To be completed by those requesting an Associate, Pet or Non-Resident membership).**

**Name of reference:** Click here to enter text. **Phone:** Click here to enter text.

**Name of reference:** Click here to enter text. **Phone:** Click here to enter text.

**Please e-mail this completed Membership Application form to the Membership Secretary, Joanne Lanyon at** [bugpug3@gmail.com](mailto:bugpug3@gmail.com) **and please submit your membership payment with your application.**

**Payment Options:**

1. **E-Transfer:**

**Please send all e-Transfers to:** [newpugclubofcanada@gmail.com](mailto:pugclubofcanada@gmail.com)

**On your e-Transfer there is a message box:**

**Please enter the amount of the e-Transfer and what it is for.**

**Example: 2020 single membership $25.00 and Pug Rescue $20.00.**

**Please only use the following password: PCC2020**

**Or**

1. **Mail:**

**Please make cheque payable to “Pug Club of Canada” and contact the Membership Secretary, Joanne Lanyon at** [bugpug3@gmail.com](mailto:bugpug3@gmail.com) **for mailing address.**

**AS THE PUG CLUB OF CANADA IS A NON-PROFIT BREED CLUB AND IS RUN VOLUNTARILY BY ITS MEMBERS, IN SIGNING THIS APPLICATION I/WE HEREBY AGREE THAT I/WE WILL NOT COMMENCE ANY LEGAL ACTION OF ANY NATURE AGAINST THE PUG CLUB OF CANADA, ITS DIRECTORS, VOLUNTEERS AND MEMBERS RELATING TO THEIR DUTIES WITH THIS CLUB.**

**I/WE HEREBY AGREE TO ABIDE BY THE CONSTITUTION, BY-LAWS AND CODE OF ETHICS SET FORTH BY THE PUG CLUB OF CANADA.**

**Name of Applicant(Electronic Signature):** Click here to enter text.

**Date:** Click here to enter text.

**Name of Applicant(Electronic Signature):** Click here to enter text.

**Date:** Click here to enter text.

OFFICE USE ONLY - Date Rec’d: Date Approved: Payment Method and Amount: