

## **Keystone Vizsla Club Membership Application**

To the Board of Directors: I hereby apply for membership in the Keystone Vizsla Club. I agree to support the by-laws and abide by the code of ethics of the Club.

Name:				
Family Member's N	ame:			
Address:				
Home Phone:		Cell Phone:		
E-Mail Address:  Notice: As a member of Keymay occasionally be viewed	rstone Vizsla Club, your info by other interested parties	ormation will be added to the mem	bership roster. Although tl	his is intended for members use, it
Do not publish ( hom	e / cell / e-mail ) data	in the Membership Direct	ory (circle any that a	apply)
Referred By (require	ed)			
My/Our Vizslas: — Ըւ	ırrently own	_ female(s) and	male Vizslas.	
Kennel Name, if appli	cable:			
□ A <b>Breede</b> □ A <b>Judge</b> □ An Intere	er — someone who ha — an AKC-licensed ju sted <b>Dog Owner</b> — s Cregistered Vizsla and	someone who, although no d wish to be active in the c	ne past three years; t actively breeding o	rthin the past two years; or exhibiting, is a dog owner
☐ Conformation	_	_	☐ Hunt Tests	☐ Field Trials
_	_ ,	Other:		
I/We can also offer	the following equip	oment, know-how, or ex	perience to aid the	club:
I/We have enclosed		5 for Single Membership 0 for Family Membership		
	(Note: The club	o membership year runs Janua	ary through December)	
Member Signature		Family Me	ember Signature	
Date of Application		_		

Make Check payable to **Keystone Vizsla Club** and mail to:
Doug Wolfgang, Membership Chair
296 Grandview Road, Hummelstown, PA 17036

Email: dmwolfgang@comcast.net