MID-ATLANTIC FLAT-COATED RETRIEVER CLUB (MAFCRC)

Membership Renewal Form

Please complete and sign this membership form and submit dues by March 1st. Additional donations to support club activities are appreciated.

Contact Information:				
Name:				
Additional Member (Family Mem	nberships Only):			
Address:				
City:	State:	Zip Code:		
Phone:	Email:			
We would love to wish your pup share with us your pup's name a	-	er and on our Social Media. Please		
Please select the type of even	ts you would attend if he	eld by the club:		
\square Conformation Handling Clinic \square Agility Coursing Test (ACT) \square FAST CAT				
□Obedience Match □Dock Diving □Virtual Rally Runs				
□ Field/Retriever Training □ Trick Dog Testing □ FCR Walk				
□Canine Good Citizen Testing □Club Picnic □Flat-Coat Fun Day				
□Scent Work Event □Photo Co	ontest			
Please select the type of even	ts you would volunteer a	at if held by the club:		
□Conformation Handling Clinic □ Agility Coursing Test (ACT) □ FAST CAT				
□Obedience Match □Dock Diving □Virtual Rally Runs				
□Field/Retriever Training □Trick Dog Testing □ FCR Walk				
□Canine Good Citizen Testing	□Flat-Coat Fun Day □Sc	ent Work Event		
Are there any types of club ever by the club?	, ,	but you would like to see sponsored		
Would you be willing to serve or				
□Yes □No				

Membership/ Donation	Amount	
Individual	25	
Family (same address, one vote per household)	35	
Junior (under 18)	10	
Donation (to support club activities, facility rentals, tent rentals, trainers, equipment rentals, food, etc.)		
Total		
Payment Method	Check	Venmo*

Please make Checks Payable to MAFCRC and mail with form by March 1st to:

Bob Herrington

7 Haldiman Lane

Blairstown, NJ 07825

Signature of Member:	Date:	
**For Venmo please email form to	o irishome@embargmail.com and submit payment t	o @Janet-

Herrington-5

You may also submit membership form via google form https://forms.gle/XkVmNodrzq36Z8MC9