

# The Low Country Australian Shepherd Club

## MEMBERSHIP APPLICATION

Name: \_\_\_\_\_ ASCA Membership # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name: \_\_\_\_\_ ASCA Membership # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Children's Names/Ages: \_\_\_\_\_

Address: \_\_\_\_\_

Day Time Phone # \_\_\_\_\_ Evening Phone # \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Web Page URL: \_\_\_\_\_

Type Of Membership:

Single - \$10 ( )

Family - \$15 ( )

Junior - Free ( )

Your Interests: Agility ( ) Conformation ( ) Stock ( ) Jr. Showmanship ( ) Obedience ( ) Tracking ( ) Other ( )

ASCA Kennel Name (if applicable) \_\_\_\_\_ Years in Australian Shepherds \_\_\_\_\_

Breed(s) of Dog(s) that you own: \_\_\_\_\_

What would YOU like to gain/learn from this club? \_\_\_\_\_

How could YOU help this club? \_\_\_\_\_

What other clubs/associations are you a member of? \_\_\_\_\_

If accepted for membership, I agree to abide by the ASCA Articles of Incorporation, By-laws, and all ASCA Rules and Regulations governing the ASCA Registry and all other ASCA programs. I also agree to abide by TLCASC's By-laws.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Mail completed application to:**

**The Low Country ASC c/o Vanessa Routh 2113 Glynwood Dr Savannah, GA 31410**