

# Michigan Hound Association, Inc.

Application for Membership

Name/s (please print) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Mailing address (if different) \_\_\_\_\_

Phone (Res.) \_\_\_\_\_ Business \_\_\_\_\_

Cell \_\_\_\_\_ Email \_\_\_\_\_

Email newsletter? \_\_\_\_yes \_\_\_\_no      mail newsletter? \_\_\_\_yes \_\_\_\_no

Kennel prefix \_\_\_\_\_

Occupation of each adult applying \_\_\_\_\_

**Type of Membership:**    Household \$40       Individual \$25       Associate

*Please answer the following questions use back of application if necessary.*

**List breeds you own?**

**List any Breed, Specialty or National or All-Breed clubs you belong to and offices held:**

**Have you ever had your AKC privileges suspended ?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Why do you wish to become a member of the Michigan Hound Association, Inc.?**

**As a member, what benefits do you expect to receive?**

List any abilities and training, other than dog related that would be an asset to the Club.

What do you feel you can contribute?

My Interests Are: Check all that apply

<input type="checkbox"/> Conformation	<input type="checkbox"/> Obedience	<input type="checkbox"/> Jr. Showmanship	<input type="checkbox"/> Agility
<input type="checkbox"/> Lure	<input type="checkbox"/> Tracking	<input type="checkbox"/> Field	<input type="checkbox"/> Other

<input type="checkbox"/> Membership	<input type="checkbox"/> Legal	<input type="checkbox"/> Newsletter
<input type="checkbox"/> Match	<input type="checkbox"/> Show	<input type="checkbox"/> Website
<input type="checkbox"/> Public Education	<input type="checkbox"/> Programs	<input type="checkbox"/> Historian
<input type="checkbox"/> Judges Education	<input type="checkbox"/> Photographer	<input type="checkbox"/> Awards
<input type="checkbox"/> Trophies	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Publicity		<input type="checkbox"/> Other

How many litters have you bred in the past 5 years? \_\_\_\_\_  
 Do you wish to be listed in our breeders directory? Yes \_\_\_\_\_ No \_\_\_\_\_

WITH THE SUBMISSION OF THIS APPLICATION FOR MEMBERSHIP IN THE MICHIGAN HOUND ASSOCIATION, I/WE THE UNDERSIGNED APPLICANT/S AGREE TO ABIDE BY THE CONSTITUTION, BYLAWS, CODE OF ETHICS OF THE MHA AND THE RULES AND REGULATIONS OF THE AMERICAN KENNEL CLUB. I/WE UNDERSTAND THAT SHOULD THIS APPLICATION BE DISAPPROVED, THE MHA IS NOT OBLIGATED TO MAKE KNOWN THE REASONS WHY.

Signature \_\_\_\_\_ Signature \_\_\_\_\_

**Endorsement by Michigan Hound Association, Inc members: (two required, from separate households)**

X \_\_\_\_\_ X \_\_\_\_\_  
 Date \_\_\_\_\_ Date \_\_\_\_\_

Mail application with check payable to: Michigan Hound Association  
 Karen Butler, c/o P.O. Box 25, Gregory, MI 48137-0025. Phone 517/ 851-8299

*Please note: Application process takes about 3 months, any questions email: Kalah@wildblue.net*

**For office use:** Date received \_\_\_\_\_ First reading \_\_\_\_\_ Second reading \_\_\_\_\_  
 Date approved \_\_\_\_\_ Date of notification \_\_\_\_\_