

UPPER MIDWEST AUSTRALIAN SHEPHERD CLUB MEMBERSHIP FORM

- New Member*
- Renewal
- Revised Information

*If joining after Sept 30th,
membership is good
through the following year

TYPE OF MEMBERSHIP

- | | |
|---|---------|
| <input type="checkbox"/> Family (2 Votes) | \$15.00 |
| <input type="checkbox"/> Single (1 Vote) | \$12.00 |
| <input type="checkbox"/> Junior (under 18-no vote) | \$ 5.00 |
| <input type="checkbox"/> Affiliate (mailings only-no vote)
<small>not eligible for year end awards</small> | \$10.00 |

PLEASE PRINT CLEARLY

NAME(S) _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE-HOME _____ MOBILE _____

E-MAIL _____

KENNEL NAME _____

WEB ADDRESS _____

Please mark your areas of interest:

Agility Barn Hunt Conformation Dock Diving Flyball Herding
 Obedience Nose/Scent Work Rally Tracking Other _____

At this time UMASC only offers year end awards in events ASCA offers titling in,
but we like to know what our members are interested in!

Please mark any services you offer:

Classes in: Agility Conformation/Handling Herding Obedience/Rally Other _____
 Stud Service Adults Occasionally Puppies Occasionally Rescue/Fostering

Please answer the following questions regarding your information on
UMASC's members only section on the web site. (www.uppermidwestasc.com)

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Include my name on the roster	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Include my Areas of Interest
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Include my address and phone#	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Include my Service Offered
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Include my e-mail address	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Include my web address

How did you hear about or discover the Upper Midwest Australian Shepherd Club? _____

I/we will abide by the rules and regulations of the Australian Shepherd Club of America (ASCA), the ASCA Code of Ethics, and the Constitution and By-laws governing the Upper Midwest Australian Shepherd Club (UMASC).

Signature(1) _____ Date _____

Signature(2) _____ Date _____

PLEASE MAKE CHECKS PAYABLE TO UMASC

Return payment and form to:

Carrie VanHorn - UMASC Membership
907 Lawson Ave E
St. Paul, MN 55106

Office Use Only

Date _____

Check# _____

Amount _____