

MEMBERSHIP APPLICATION



XOLOITZCUINTLE CLUB USA

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Do you currently own a Xoloitzcuintle? () yes () no How Many? _____

Dogs' Name(s): _____

Date(s) of Birth: _____

Appearance: () Hairless () Coated

Dog Size: () Miniature () Intermediate () Standard

Interests: () Conformation () Obedience () Rally () Agility () Therapy () Pet () Rescue

Are you a member of any other dog clubs? () yes () no If so, please list:

Please list any special talents, training or skills you have to offer the XCUSA club:

Sponsors:

Please have two sponsors sign your application prior to sending it in. Sponsors must be XCUSA members in good standing.

Club Member Signature _____ Print Name: _____

Club Member Signature _____ Print Name: _____

Membership Agreement

I have gone to XCUSA's website <<<http://www.xoloworld.com>>> and have read XCUSA's Constitution and By-Laws, Code of Ethics, and the XCUSA Breed Standard published January 14, 2006, the accepted Breed Standard for the Xoloitzcuintle Club USA. I understand and agree to abide by membership agreements found in the Constitution and By-Laws, Code of Ethics, and abide by XCUSA's accepted Breed Standard for the Xoloitzcuintle. I understand that any violation of the Xoloitzcuintle Club USA Code of Ethics and/or By-Laws will be subject to action under grievance and charge procedures, Article VI, of the By-Laws.

Signature: _____ Date: _____

Please sign and date this form. In order for your membership application to be processed this form must be completed in full with the Membership Agreement signed. Return application with appropriate fees to:

Xoloitzcuintle Club USA
C/O Connie O'Hara
4070 Kimmich Ct
Clinton, WA 98236

Dues are per person in the amount of \$25.00 annually, USA; \$30.00 annually, foreign. Due by January 1st of each year. Make Checks payable to Xoloitzcuintle Club USA (US Funds only)

Club Use Only

Date _____ Received: _____ Check Number: _____ Date _____ Approved: _____

Date Notified: _____ Date of Deposit: _____