

Glacial Lakes Greater Swiss Mountain Dog Club Membership Application

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ E-Mail _____

Associate - \$10/year Regular - \$15/year Household - \$20/year

I wish to join Glacial Lakes GSMDC because _____

Other club affiliations _____

Please enclose your application with a check payable to Glacial Lakes Greater Swiss Mountain Dog Club and submit to:

Pat Runde
Membership, GLGSMDC
W24477 Rogneby Lane
Galesville, WI 54630

I (we) agree to abide by the Constitution and Bylaws of the Glacial Lakes Greater Swiss Mountain Dog Club, and follow the rules of the American Kennel Club.

Signature(s) _____

Sponsor Name _____ Sponsor Signature _____

(Sponsor required for membership)

Interests (Please check all that apply)

Interest Area	Previously Involved	Currently Involved	Future Involvement
Breeding			
Conformation			
Obedience			
Agility			
Herding			
Carting/Freight			
Tracking			
Schutzhund			
Weight Pulling			
Search & Rescue			
Therapy			
Pack Dog			
Other (Specify)			

If you are interested in assisting our club in any of the following areas, please circle the appropriate topic:

Publicity Newsletter Fun Matches Web Development

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GSMD Information**

GSMD AKC Name: _____

Call Name: _____ Whelp Date: _____

Sex: _____ Breeder: _____

Sire: _____

Dam: _____

AKC Registration Number: _____

GSMD AKC Name: _____

Call Name: _____ Whelp Date: _____

Sex: _____ Breeder: _____

Sire: _____

Dam: _____

AKC Registration Number: _____

GSMD AKC Name: _____

Call Name: _____ Whelp Date: _____

Sex: _____ Breeder: _____

Sire: _____

Dam: _____

AKC Registration Number: _____

GSMD AKC Name: _____

Call Name: _____ Whelp Date: _____

Sex: _____ Breeder: _____

Sire: _____

Dam: _____

AKC Registration Number: _____