## **Membership Application**

Please read the TIKO Code of Ethics first.

\*\*Signing this application automatically indicates agreement with the Code of Ethics\*\*

Contact Information		
Name/s: (including children under age 18, if a family membership)		
Street Address: (including Apt. Or PO Box)		
City:		
Province:		
Postal Code:		
Telephone Number: Home: Cell:		
Email Address:		
	CKC Info	ormation
CKC Membership Number: (if any)		
CKC Kennel Name: (if any)		
CKC Tattoo Number: (if any)		
		N 1 (D D )
List of Breeds Owned by A	pplicant:	Number of Dogs per Breed

Other Clubs Applicant Belongs To:	Positions Held
Other Clubs Applicant Belongs To:	Positions Held
Other Clubs Applicant Belongs To:	Positions Held
Other Clubs Applicant Belongs To:	Positions Held

I (we) have read the TIKO Code of Ethic and agree to abide by the Constitution and By-laws of the Thousand Islands Kennel and Obedience Club:

Sponsor Name:	Signature:	Dated:

Applicant/s Name:	Signature:	Dated:
		-

Questionnaire: Help us get to know you. © Please indicate your interests by placing a check mark beside the listed activities / tasks below. If typing you can just copy and paste this check mark.  $\lor$ 

## **INTERESTS:**

Conformation	Flyball	
Obedience	Agility	
Rally	Freestyle	
CGN	Barn Hunt	
Other		

Willing to learn / help with the following:



## The Thousand Islands Kennel & Obedience Club

Show / Trial Setup	Hospitality meetings	
Sanction Match	Hospitality Shows	
Training Classes	Equipment	
Show Committee	Newsletter	
Judges Selection	Website	
Marketing	Education	
Other		

## Internal Use Only:

Date Application Received:	
Date Published to Membership:	
Date of Acceptance:	