

# Membership Application

[PLEASE PRINT OR TYPE]

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

SPOUSE \_\_\_\_\_ CHILDREN \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ OCCUPATION \_\_\_\_\_

NAME OF MALAMUTES PRESENTLY OWNED _____ _____ _____	YOUR INTEREST CONCERNING MALAMUTES	
	_____ Conformation Showing	_____ Breeder
	_____ Pet Owner	_____ Obedience
	_____ Sledding/Working	_____ Weight Pulling

KENNEL NAME IF ANY \_\_\_\_\_ CODING \_\_\_\_\_

Past or Present dog organizations you belong to \_\_\_\_\_

Offices held in ANY past or present club organization \_\_\_\_\_

Special Talents or interests which would be helpful in serving this club \_\_\_\_\_

Are you will to be an ACTIVE MEMBER of this club? \_\_\_\_\_ Are there any special capacities in which you would like to serve? (List them) \_\_\_\_\_

Suggestions for club programs or activities \_\_\_\_\_

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

AFTER COMPLETING THE ABOVE APPLICATION BLANK, PLEASE SUBMIT IT WITH YOUR PAYMENT TO THE SECRETARY. PLEASE MAKE CHECKS PAYABLE TO ALASKAN MALAMUTE CLUB OF WISCONSIN, INC.

**MEMBERSHIP DUES INCLUDING \$5 INITIATION FEE**

Senior Membership (Single) \$20  
 Junior Membership (Single) \$15 (under 18)  
 Family Membership \$25  
 Associate Membership \$19

AMCW, INC  
 P. O. BOX 789  
 Hales Corners, WI 53130  
 Email: [lgoba@earthlink.net](mailto:lgoba@earthlink.net)

P	VP	S	S	T	B	B	B	B
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## ALASKAN MALAMUTE Club of Wisconsin

KENNEL CODING	
P	- Puppies for Sale
B	- Dogs Boarded
G	- Grooming
AD	- Adult Dogs for Sale
SS	- Stud Service Available
PO	- Puppies for Sale Occasionally