

BEARDED COLLIE CLUB OF SOUTHERN CALIFORNIA

MEMBERSHIP APPLICATION

Make checks payable to *Bearded Collie Club of Southern California or inquire about paying by Zelle* and return along with this form to Mary Parker, Treasurer, 24040 Eagle Mountain Road, West Hills, CA 91304. If you have any questions, please don't hesitate to contact Susann Brody, susann@bccsc.net or 818 422-9904.

Print Name(s) in your household applying:		
Address	City	Zip
Telephone: (home)	(Cell)	
Email:		
How many Beardies do you own? Names and a	ges	
Where did you get your Beardies?		
Are you a breeder? Kennel Name		
Other dogs that reside in your home: Breed and call	name:	
	ur events and on any committees. Areas th Education	Days/Bounces 🗌 Show
LEVEL OF	MEMBERSHIP YOU DESIRE	
Full Voting Membership, a	ge 18 and older	\$25
Actively involved by attending meet Enjoy all club privileges, including o Voting rights are activated after atte	ne vote per membership and the right to h	old office.
Please list the BCCSC meetings/even	nts you have attended:	
1)	2)	
	rly attend meetings during the year. ception of voting or right to hold office.	\$25
I/we hereby apply for membership in the Bearde	•	
Constitution and Code of Ethics, and by the rules Constitution, Bylaws, and Code of Ethics. The BC announcements. I understand that it is my respo postal communications if necessary.	of the Bearded Collie Club of America. CCSC uses email and the website for me	I have read the BCCSC eeting notifications and event
·	LL COMMUNICATION TO BE BY EM	4 <i>1L.</i>
Signature:		Date:
Signature:		 Date:

Sponsor: (Please print name of the current BCCSC member's name: _____

Signature of Sponsor: _____

Date: _____