



Australian Shepherd Club of New England

Membership Application Form

ASCNE membership is open to all persons who are in good standing with ASCA and ASCNE and who shall subscribe and adhere to the principles and objectives of ASCNE. Persons, who are currently suspended or expelled from ASCA, may not join ASCNE until they are reinstated in ASCA. Ownership of an Australian Shepherd is not required for membership.

Membership dues not paid by 31 January will be considered lapsed. New membership applications accepted and approved after Sept 1st will be considered paid for the following year.

ASCNE offers the following membership types:

- o Single Membership - \$15.00
- o Family Membership - \$22.50
- o Persons under 18 and not living with an ASCNE member - \$7.50.
- o Newsletter only (non-voting, non participating do not require ASCNE sponsors nor can they sponsor new members) - \$12.00

*If you are applying for a family membership, please list the name and date of birth for each child under 18:

Name _____ Date of Birth _____
 Name _____ Date of Birth _____

What are your interests in ASCA programs?

Agility ___ Conformation ___ Juniors ___ Obedience ___ Stockdog ___ Tracking ___
 Other _____

Are you a member of other Australian Shepherd Clubs, Which? _____

How many Aussies do you own? _____

Are you willing to work at ASCNE sponsored events? _____

It is mandatory that you provide the names of two ASCNE members who will sponsor you.

1. _____ 2. _____

Annual dues are due on January 1. Dues not paid by January 31 are considered lapsed. New member dues paid after September 15 will be accepted as paid for the following year.

I (we) apply for ASCNE membership and agree to abide by the constitutions, bylaws, rules, regulations, code of ethics, policies, procedures, and dispute-resolution rules of both ASCA and ASCNE.

Signature(s) _____

Fill out the following information and send with payment made out to ASCNE to: Dottie Duclos, P.O. Box 1288, Fall River, MA 02722, 774-644-0693, woodchip@meganet.net

Date _____ **ASCA Membership #** _____

Name _____

Kennel Name _____ Web Address _____

Address _____

City _____ State _____ Zip _____

Phone _____ e-mail _____

Membership Type * Single ___ Family ___ Junior ___ Newsletter Only ___

NOTE: Dues must be paid to be eligible for the ROM program