



West Highland White Terrier Club of Northern Ohio

Membership Application

Name _____ Birthday (Month/Day) _____ (Please provide)

Kennel Name _____

Address _____

City _____ State _____ Zip _____

E-mail address _____ (Please provide) Telephone _____

Are you a member of any other Breed, obedience, or Kennel Club? Please specify:

Are you in good standing with the American Kennel Club? Yes _____ No _____

How many Westies do you own? _____ Are they registered with the AKC? _____
If you have bred dogs, indicate the breed(s) and number of litters below:

Did you purchase your Westie for: _____ Show _____ Breeding _____ Championship

Have you shown your dog in Conformation? _____ Obedience? _____

If approved for membership in the WHWTCNO, Inc., I agree to abide by the Constitution, Bylaws, and Code of Ethics of this club and the American Kennel Club.

Signature _____ Date _____

Signature (Joint membership) _____ Date _____

All applicants *must* be sponsored by two members in good standing with the WHWTCNO who know the applicant and will submit written letters of recommendation for his/her acceptance.

Sponsor #1 _____ Date _____

Sponsor #2 _____ Date _____

Make checks payable to WHWTCNO and return to:

Jason C. Roberts
Membership Chair
1085 Whispering Woods Dr.
Macedonia, Ohio 44056

Membership Dues:

- | | | |
|---------------------------------|---------|--|
| <input type="checkbox"/> Single | \$15.00 | (per person, per year) |
| <input type="checkbox"/> Family | \$20.00 | (husband, wife and all children under 18 years) |
| <input type="checkbox"/> Junior | \$8.00 | (per child under 18; all privileges except voting) |