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## Membership Application

Name

\_\_\_\_\_  
*Last First Initial*

Address

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City State Zip Country*

Phone number

\_\_\_\_\_  
*/ / /*

\_\_\_\_\_  
*Home Work Fax Email*

German language  
proficiency

None       Little       Moderate       Proficient

Occupation

\_\_\_\_\_  
*Use additional paper, if more room is needed to complete sections below.*

Referral

\_\_\_\_\_  
*Who referred you to the NADKC and why are you joining?*

Kurzhaars owned

\_\_\_\_\_  
*Registered Name Registration Number*

Dog testing experience

\_\_\_\_\_  
*Testing Organization Type of Test Level of Results*

Judging experience

\_\_\_\_\_  
*Testing Organization Type of Test # of Tests Judged*

Membership

- Regular Member..... \$75.00/yr. (US)  
 Family Member..... \$25.00/yr. (US)  
*(spouse or dependent child of regular member, enters tests at regular member rate, non-voting)*  
 Life-Paying Member ..... \$750.00 (US)  
*(or four consecutive \$187.50 quarterly payments)*  
 Blätter, DKV Newsletter in German (US and CA)..... \$15.00/yr.  
*International members..... \$20.00/yr.*  
*(New members joining the club between January 1st and December 31st will pay the full annual dues. Dues are not prorated. New members joining and paying full dues between November 1st and December 31st will be paid through December 31st of the following year.)*

Mail application to .....

*R @ A d a æ  
Treasurer, NADKC  
I I A S a U G A A C  
Lake Zurich, IL 60047 USA*

**Mail completed form with  
check payable to NADKC.**