



IRISH WOLFHOUND ASSOCIATION OF NEW ENGLAND, Inc.

Application for Regular Membership

Please complete **all items** before returning this form to the Club Secretary.

The membership year runs January 1st through December 31st

Note: There are no family memberships available; each family member must complete a separate application.

Regular Membership is open to persons over the age of 18 years who subscribe to the purpose of our Club and have been Associate Members of the Club for a period of at least two (2) years. Applicants must be in good standing with the American Kennel Club. Regular members have the authority to vote, hold office, serve on committees, and enjoy all the privileges open to members.

Regular Members are expected to attend meetings, as voting members are necessary for a quorum.

As a member of IWANE, I agree to abide by the Constitution and Bylaws of the Club, the IWCA Code of Ethical Conduct and Standard of Behavior for Breeders, and the rules and regulations of the American Kennel Club.

Please accept my Application for Regular Membership in the Irish Wolfhound Association of New England. I agree to support and abide by the principles and goals of the Club.

Name _____

Home Address _____

City _____ State _____ Zip _____

Home Telephone _____ Email _____

Profession _____

Business Address _____

City _____ State _____ Zip _____

Business Telephone _____

1. Please list the names of IWs currently owned, ages, sex and their breeders:

2. List all IWANE meetings you have attended since becoming an associate member:

3. Besides meetings, what club activities/events or committees have you participated in since you became an associate member?

4. Please list any other IW clubs and all-breed kennel clubs to which you belong, and offices you may hold or have held:

5. Are you a member in good standing of the Irish Wolfhound Club of America, Inc.? _____ If so, are you:
Regular _____ Associate _____ If not a member, do you intend to apply? _____

6. Please list any activities and other areas of the club in which you would be willing to participate:

7. Do you have any comments or suggestions concerning present or future club activities, ideas for programs for meetings, or other areas?

Signature of _____ Date: _____
Applicant: _____

Please return your signed application to the Club Secretary at the address listed below. Your application will be reviewed and voted upon at the next scheduled Board Meeting of the Club officers. **DO NOT INCLUDE DUES PAYMENT WITH YOUR APPLICATION.** You will be invoiced for your dues upon notification of your acceptance.

Return completed form to:
IWANE
Colleen M. Brown Secretary
9 Main Street
Swansea, MA 02777

BOD Use Only

BOD Date Reviewed:
Comments: