



# North Star Havanese Club New Member Application

*Thank you for your interest in the North Star Havanese Club*

Make check out to **North Star Havanese Club**, return it with the application to:

**Nona Dietrich – NSHS Membership 20 Westwood Road Minnetonka, MN 55305-1585**

Applicant Name: \_\_\_\_\_

Co-Applicant (additional in household): \_\_\_\_\_

Street / PO Box Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Kennel Name: \_\_\_\_\_

Website: \_\_\_\_\_

Occupation: \_\_\_\_\_

**Membership Dues Must Accompany this Application. Indicate Your Membership Type Here:**

Single/Regular \$15/yr      Household \$25/yr      Associate (non-voting) \$10/yr      Junior \$10/yr

**Before Your Membership is Accepted for a Vote of Approval, You MUST Attend at Least 1 Club Meeting**

**I/We are Interested in Participating with the Club in the Following Venues/Activities - note all applicable**

Conformation    Obedience/Rally    Agility    Therapy    Social Events    Nosework    Barn Hunt

Other Activities - please detail: \_\_\_\_\_

How Many Dogs Do You Own?      Breed(s)?      Number of Years in Havanese?

Are Your Dogs Registered with AKC?    HCA?    If so, are You in Good Standing with the/these Club(s)?

If not, explain: \_\_\_\_\_

List the Names of Any Other Dog Clubs in Which You Hold Membership: \_\_\_\_\_

List Offices or Committee Positions You Have Held with other Clubs: \_\_\_\_\_

I/we understand that by signing this application I/we are verifying that I/we meet all membership requirements as stated below. I/we understand that the Club is not obligated to give a reason if membership is denied, and if application is denied, all moneys will be promptly refunded.

- \* Must own a Havanese (except for an Associate) \* Must agree to abide by the by-laws and the Code of Ethics as outlined by our parent club The Havanese Club of America [www.Havanese.org](http://www.Havanese.org)
- \* Must pay annual dues in a timely manner    \* Must not be under AKC disciplinary action
- \* Must complete the NSHC application and meet the minimum participation standards prior to being voted in by a majority of the NSHC Board Members

I/we certify that the above information is true and correct to the best of my/our knowledge. I/we also understand that false information or omission of data may be grounds for refusal of membership. All information is held in strict confidentiality.

Applicant Signature: \_\_\_\_\_

Co-Applicant(s) Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

Date Requirements Met: \_\_\_\_\_

Date Board Approved: \_\_\_\_\_



# North Star Havanese Club

## MEMBERSHIP RENEWAL FORM

NSHC Appreciates Your Continued Support and Participation in the Club

**Don't let your membership lapse - Renewal Due No Later Than March 15th**

Make check out to North Star Havanese Club and return it with the application to:

**Nona Dietrich – NSHS Membership 20 Westwood Road Minnetonka, MN 55305-1585**

Member Name (as it should appear in our directory):

Household Member Names:

Street / PO Box Address:

City, State Zip:

Phone:

Email:

Kennel Name:

Website:

**Membership Dues Must Accompany this Renewal. Indicate Your Membership Type Here:**

Single/Regular \$15/yr

Household \$25/yr

Associate (non-voting) \$10/yr

Junior \$10/yr

**Kennel Name Listed on the NSHC Breeder Contact List \$10/yr**

Kennel Name:

Breeder Name:

Website URL:

City/State:

Email address

**I/We are Interested in Participating with the Club in the Following Venues/Activities - note all applicable**

Conformation    Obedience/Rally    Agility    Therapy    Social Events    Nosework    Barn Hunt

Other Activities - please detail:

\* Must own a Havanese (except for an Associate) \* Must agree to abide by the by-laws and the Code of Ethics as outlined by our parent club The Havanese Club of America [www.Havanese.org](http://www.Havanese.org)

\* Must pay annual dues in a timely manner \* Must not be under AKC disciplinary action

I/we certify that all of the above information is true and correct to the best of my/our knowledge. I/we also understand that false information or omission of data may be grounds for membership review by the NSHC Board.

Member Signature:

Household Member(s) Signature(s):

Date:

Date Renewal Paid/Filed: