



NEW MEMBERSHIP APPLICATION

LAST NAME (S) _____ FIRST NAME (S): _____

STREET ADDRESS: _____ CITY: _____

STATE: _____ ZIP CODE: _____ - _____ HOME PHONE: _____

E-MAIL: _____ OCCUPATION(s): _____

Please provide information about each of your Standard Schnauzer(s) that you currently own:

Registered Name Call Name Color Birth date Breeder

1. _____
2. _____
3. _____
4. _____

I (we) are interested in the following activities *(please circle as many as applicable)*

Conformation Obedience Tracking Herding Agility Grooming General Care Club Functions

SSCNC Members in good standing, by sponsoring this Application, you are stating that you have personal knowledge of this person(s) and are affirming that they subscribe to the best interests of this club the Standard Schnauzer as a Breed, and their own purebred dogs' welfare.

SSCNC Member Signature Date: _____

SSCNC Member Signature Date: _____

**PLEASE FILL OUT BOTH SIDES OF THIS APPLICATION. PLEASE
SIGN APPLICATION WHERE INDICATED ON REVERSE SIDE.**

Please tell us a little bit more about yourself.

- **Your family consists of** *(children, other pets)*: _____

- **Your family interests and hobbies:** _____

- **Why did you choose a Standard Schnauzer?** _____

- **Membership in other Dog Clubs** *(please list the club and year you joined)*:

- **Have you received help and guidance from your breeder** *(training, grooming, general care guidance)?*

- **Other comments or questions you have about SSCNC:**

CODE OF ETHICS GENERAL MEMBERS

- 1 I will maintain high standards of health and care for my dogs.
- 2 I will comply with AKC rules and regulations.
- 3 I will make every effort to learn about the structure, anatomy, action inherited traits and behavior of the dog; especially where such learning applies to working breeds and specifically to the STANDARD SCHNAUZER.
- 4 I shall conduct myself at all times in a sportsmanlike manner at all Performance, Club, and Conformation events that I attend.

The Standard Schnauzer Club of Northern California is an AKC Licensed Breed Club. Prior to your Application for membership being approved or not approved, **you must attend at least TWO Sanctioned SSCNC Club functions within one year of your Application date and obtain TWO SSCNC Member signature endorsements on your application.** You will receive a bi-monthly newsletter from SSCNC to keep you informed of upcoming club functions you can attend. Use of membership in SSCNC for personal or financial gain is reason for immediate denial of an Application or termination of membership

APPLICANT(s) SIGNATURE: _____

APPLICANT(s) SIGNATURE: _____

DATE: _____

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PLEASE RETURN YOUR APPLICATION ALONG WITH THE \$15.00 APPLICATION FEE TO:

MAKE CHECK PAYABLE TO: SSCNC

SSCNC 1st V.P, **MARY LOU JUST** * 5240 Pondorex Road Auburn, CA 95602-9667
Telephone: 530-878-3612 or **E-Mail:** Membership@stdschnauzer.com

