# **AEDCA APPLICATION FOR MEMBERSHIP**

AEDCA membership is open to all persons who are in good standing with the American Kennel Club and who subscribe to the rules and purposes of the club. Please submit **one application per person.** Please type or print clearly in black ink.

**Please note:** Information provided on this application will not be sold or provided to anyone other than AEDCA club members and the AKC. Information from this application will be summarized and emailed to the membership, and your contact information will be published in the AEDCA Membership Directory upon acceptance into the AEDCA.

ddress:				
y:	State:	Zip:	Country:	
one:		_Email:		
Which type of mem	bership are you applying for: (choose or	<b>ne</b> ) Individual (18+) □ Foreign	(18+) □ Junior (18-) □ Associate (18+) □	
Name of other AED	ame of other AEDCA Member(s) residing at the same household address:			
Do you presently ov	you presently own any registrable pure-bred dog(s)? Yes $\square$ No $\square$			
If yes, indicate bree	d(s):			
-	rican Eskimo Dog (Note: Owning an An owned American Eskimo Dogs?			
Have you bred and	registered litters (any breed) within the la	ast three (3) years? (choose one)	Yes □ No □	
Do you currently br	eed American Eskimo Dogs? (choose or	ne) Yes $\square$ No $\square$		
If yes, (check all tha	at apply) Standards $\Box$ Miniatures $\Box$ T	'oys □		
Have you exhibited	at AKC approved evens within the last to	wo (2) years? (choose one) Yes	; □ No □	
If yes, please list all	that apply, i.e., agility, rally, conformation	on, etc.:		
Are you an AKC ap	proved judge? (choose one) Yes  No	) []		
If yes, please list all	that apply:			
Have you ever been	suspended by the AEDCA? (choose on	e) Yes 🗆 No 🗆		
If yes, please give d	ates and explain:			
Have you ever been	suspended by the AKC? (choose one)	Yes □ No □		
If yes, please give d	ates and explain:			
Do you belong to ar	ny other dog clubs? ( <b>choose one</b> ) Yes $\square$	No		
If yes, please list clu	ub names and any office(s) held (past and	/or present):		
Please explain why	you would like to become a member of t	he AEDCA:		
Do you have any ex	pertise that could benefit our club?			

**Continued On Next Page** 

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## Page 2

As a member of the American Eskimo Dog Club of America (AEDCA), I agree to abide by the following Code of Ethics:

• To give my dogs proper care to ensure that their physical, mental, and emotional needs are met.

I certify that I am currently in good standing with the AKC.

- To plan each litter with care and consideration of the parents' general conformance to the American Eskimo Dog Breed Standard, including type, soundness, temperament, and freedom from hereditary defects.
- To keep all official registration papers and contracts in accordance with the American Kennel Club (AKC) rules and regulations.
- Never to sell any puppies to pet stores or commercial dog brokers, or to allow any of my puppies or dogs to be used in any kind of
  promotional activities, such as a prize in a raffle.
- To be fair and honest in my dealings with the public and prospective buyers regarding my dogs and the American Eskimo Dog breed; to exhibit good sportsmanship at all times; and to conduct myself at all times in such a manner as to reflect positively on purebred dogs in general and on the American Eskimo Dog and the AEDCA in particular.

I affirm that the information given in this application is true to the best of my knowledge. Upon election to membership, I agree to abide by the Constitution and Bylaws of the AEDCA and the rules of the AKC and AKC's Code of Sportsmanship, and to work toward the goals as set forth therein. I agree to abide by the AEDCA Code of Ethics and to work for the betterment of the purebred American Eskimo Dog.

Signature of Applicant	Date:	
are not he immediate family (husband, wife, father, mother, son.	rent AEDCA members in good standing who reside in separate households; that we Daughter, brother, sister, father-in-law, mother-in-law, son-in-law, daughter-in-law, o the integrity of this individual; and that this application is true and correct to the	
Name:	Name:	
Address:	Address:	
Phone:	Phone:	
Comments:	Comments:	
Signature: Date: NOTE: Sponsor signature valid for 6 months from date of signing	Signature: Date:  NOTE: Sponsor signature valid for 6 months from date of signing	
If paying by check ( <b>payable to "AEDCA"</b> )  Send dues and completed application via USPS to:	Denise Schneider AEDCA Membership Chair 20434 Royalton Road Strongsville, OH 44149-4968 Phone: (44) 823-3166	
If paying electronically: Email your completed application to:  and send your dues payment via PayPal (add \$1.00 processing fee) to:	Denise Schneider aedca.membership@hotmail.com aedca.treasurer@gmail.com	
or by Zelle: send your dues payment to:	aedca.treasurer@gmail.com	

#### AEDCA APPLICATION FOR MEMBERSHIP

### Please Make Sure You Are Filling Out One (1) Application For Each Person Applying.

Please answer all questions completely. If you need additional room, indicate on the form that an answer is continued on a following page and attach as many additional pages as necessary.

If there is any additional information you would like for the AEDCA Board to know, please attach that information as well.

Scanned in or PDF copies of signatures of the applicant and sponsors will be acceptable.

# **AEDCA Annual Membership Dues**

Individual (1 person/1 vote) \$25. Foreign (individuals residing outside the USA) (1 person) \$25. Junior (anyone under the age of 18) (1 person) \$10 Associate (1 person) \$15

Please Note: Per AKC, Foreign, Junior and Associate members may not vote of hold office.

Individual, Foreign and Associate members must be over 18 years of age. Individual, Junior and Associate members must reside in the USA.

Annual dues include four quarterly issues of the AEDCA Review newsletter in ELECTRONIC FORMAT.

#### **Membership Application Processing Timeline**

Your name (as the applicant), location (City and State) and a brief summary will be extracted from the application and shall be emailed to the membership after the next monthly Board meeting and members are given an opportunity to provide comments. If no negative comments are received prior to the next subsequent monthly Board meeting, the Board will vote to approve your application (2/3 of the Board present must vote to approve). Once you are considered elected to membership you shall be notified by the Corresponding Secretary. Upon acceptance of membership, your name, address, contact information, and anniversary date will be published in the AEDCA Membership Directory.

You will be notified by the AEDCA Membership Chair when processing has been completed.