



Date: _____

Saskatoon Retriever Club

Membership Application & Renewal

Name(s) _____

Address _____

Postal Code _____

Tel _____ Cell _____ E-Mail _____

Are you a CKC member? Yes No

CKC Member No. _____

What Breed of Retriever do you own _____

Yearly Membership \$100.00

I / We agree to allow my email address to be part of a distribution list to be used by the Saskatoon Retriever Club Executive for the purpose of disseminating club information. YES NO.

I / We agree to abide by the Constitution, Code of Ethics, Aims and By-laws of the Saskatoon Retriever Club and the By-laws and Rules of the Canadian Kennel Club

Signature of Applicant

Please mail application and membership fees payable to:

The Saskatoon Retriever Club

C/O Lynn Campbell

Box 176, Clavet

S0K 0Y0