

MEMBERSHIP APPLICATION

Please send completed LRCO renewal application to:

Labrador Retriever Club of Ontario C/O Laurie Orr 248218 5 Sideroad, MONO, Ontario, L9W 6L1

Name:	Address:	
Phone:	City:	
Province/State:	Postal/Zip Code:	
E-mail:	Website:	
Kennel Name:	Tattoo Combination:	Do You Microchip:
Are you a current member in good standing with the CKC?	Yes	No

If yes CKC Number:

	Conformation * Obed * Field * WC Tests
Activities or interests in the breed:	Hunt Tests * Tracking * Hunting * Agility
Please circle all that are applicable	Articles for Newsletter and/or Newsletter Editor
	Conformation * Obed * Hunt Tests/ WC tests
Interested in assisting the LRCO Specialty in these areas:	Setup and/or clean up * Raffle Tables General
Please circle all that are applicable	Help

Please tell us a bit about you and your involvement in Labradors:

By signing this application for membership you agree to abide by the C.O.E. & BYLAWS of LRCO:

Signature of applicant:

Date:			Voting Member:	
Payment inclu	ded: \$		Voting Member:	
Indivi	idual \$25.00) Single resident, v	voting member	
Famil	y \$35.00		In the case of a family membership, there shall be two votes per household, & these members to be designated at the time of application for membership	
Assoc	iate \$30.00) Non-resident, no	n-voting member	
	•	e email MUST be sent t	ey Transfer to Laurie Orr: monohavenlabradors@bell.net o Laurie giving Security Question & Security Password) able to Labrador Retriever Club of Ontario	
Memb	er Sponsor #1	OR eneque made pays	tore to Labrador Retriever Club of Ontario	
	er Sponsor #2			