



Eastern Canada Dachshund Club inc
Le Club Teckel de l'est du Canada inc.

Return this form to:
Jackie Houle-Veinot
 59 Robar Road
 New Germany, NS B0R 1E0

or via email to: ECDC.CTEC@gmail.com

membership renewal

NAME(s): _____

ADDRESS: _____

Postal Code _____

TELEPHONE: (Res.) _____ **Members CKC #** _____

E-MAIL: _____

CKC Reg'd KENNEL NAME: _____ **CKC Tattoo digits** _____

WEBSITE URL: _____

How many Dachshunds do you own? ML ___ MS ___ MW ___ SL ___ SS ___ SW ___

NOTE: The membership year runs from April 1st to March 31st.

- | Type of membership: | Fees | |
|---|------------|--|
| <input type="checkbox"/> Regular | (\$ 25.00) | |
| <input type="checkbox"/> Life | no fee | |
| <input type="checkbox"/> Associate | (\$ 25.00) | resides outside Club's Area of Operation |
| <input type="checkbox"/> Junior | (\$ 5.00) | (8 to 18 years) |
| <input type="checkbox"/> Family rate | (\$ 40.00) | Maximum fee per household |
| <input type="checkbox"/> Mailed paper copy of Teckel Tales - add \$15.00 to your membership fee | | |
| <input type="checkbox"/> Your Kennel Card in Teckel Tales - add additional \$10 fee and enclose card. | | |

1. Are you currently an active Dachshund breeder? Yes No

2. If Yes – Do you wish to have your name / kennel name / tel. / e-mail listed on the ECDC Website? (There is no charge for this) Yes No

3. Which breed(s) of Dachshunds do you want listed?
 Standard Smooth Longhaired Wirehaired
 Miniature Smooth Longhaired Wirehaired

4. Do you own other breeds? Number?: ___ Breed(s) _____

5. Are you a member of the Canadian Kennel Club? Yes No

6 Do you belong to any other dog clubs? Yes No

7. Do you hold office in any other dog clubs? Yes No

- 8 Dog-related activities that interest you? (check all that apply):
- | | |
|--|--|
| <input type="checkbox"/> Conformation Shows | <input type="checkbox"/> Field Activities/Tracking |
| <input type="checkbox"/> Obedience / Rally Trials | <input type="checkbox"/> Agility, Chase Ability |
| <input type="checkbox"/> Earthdog Tests or Barn Hunt | <input type="checkbox"/> Canine Good Neighbour |
| <input type="checkbox"/> Other: _____ | |

Member(s) signature(s) _____

Date: _____ **Make cheque payable to Eastern Canada Dachshund Club**
 or etransfer to: ECDC.CTEC@gmail.com