



Shiloh Shepherd  
Incorporated  
Dog Club of America

MBR # \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
NEW Renewal  
Date Received \_\_\_\_\_  
Amount Paid \$ \_\_\_\_\_

Established 1991

### Membership Application

Name: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_  
Occupation: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Registered Kennel Name (if any): \_\_\_\_\_

Please list two references that we can contact:

Name: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Are you now or have you been a member of any other clubs?

Name: \_\_\_\_\_ Type of Club: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you hold any office? \_\_\_\_\_

*Please list any additional club affiliations/positions held on the back of this application.*

If asked, would you be willing to function in any particular office or on any committee, or is there any service to the club you would like to perform? \_\_\_\_\_

How many Shiloh Shepherds do you own? \_\_\_\_\_ Are they: Show Breeding Working Pet quality?

*If you would like to tell us more about your dogs, your breeder, etc., please do so on the back of this application.*

Do you plan on purchasing another Shiloh Shepherd in the future? \_\_\_\_\_ When? \_\_\_\_\_

What are the exact requirements for the dog you will purchase next? \_\_\_\_\_

Do you plan on showing your dog if he/she has all the quality requirements? \_\_\_\_\_

*Please state your past experience in dog showing/training on the back of this application.*

What other plans do you have for the Shilohs you now own/plan to acquire in the near future. (Please check all that apply.)

- |             |                   |            |
|-------------|-------------------|------------|
| Obedience   | Search and Rescue | Schutzhund |
| Therapy Dog | Agility           | Herding    |
| Service Dog | Police Work       | Other      |

A short statement as to why you would like to be a member would be appreciated: \_\_\_\_\_

A short statement as to what you expect from/what you can do for our club would be appreciated: \_\_\_\_\_

Please list any additional comments/concerns on the back of this application. Thank you.

**Please enclose the appropriate fee and sign below.**

**First year \$35 (renewal \$25 each year thereafter) – Two years \$55 -- Three years \$75**

With my signature \_\_\_\_\_ I agree to abide by the Constitution and the By-laws of the SSDCA Inc. and, if applicable, the Breeders Code of Ethics. All the information given above is correct to the best of my knowledge. I understand that any fraudulent statements made herein could lead to the revocation of my eligibility.

Mail completed application and membership fee to: **SSCDA, Inc. PO Box 309 Silver Springs, NY 14550**