



Rock River Valley ASC Membership Application & Renewal

Name: _____

Address: _____

City: _____

State: _____

ZIP: _____

Phone: _____

E-mail: _____

Kennel Name: _____

Website: _____

REFERRED BY

(new members only):

☐ Check here if you would like your site linked to the RRVASC webpage. Reciprocal links appreciated. RRVASC reserves the right to refuse links to sites deemed inappropriate or against the ASCA and/or RRVASC code of ethics.

Types of Membership:

Individual	Single Membership; One Vote; Must be 18 years or older	<input type="checkbox"/> \$15.00
Family	Any person & resident members of their immediate family household; Voting privileges for two adults; Juniors under age 18 have non-voting membership; <i>Please list names of both voting members as well as names and birth dates of all Juniors.</i>	<input type="checkbox"/> \$20.00
Junior	Any person under age 18 not included under a family membership; No vote.	<input type="checkbox"/> \$5.00

Please check areas of interest: ☐ Stock ☐ Conformation ☐ Obedience ☐ Agility ☐ Tracking ☐ Rally
☐ Other _____

I would be willing to help the club in the following ways:

☐ Board Position ☐ Serve on committee ☐ Help at shows/trials ☐ Show Secretary ☐ Ring Steward
☐ Other _____

I, _____ & _____
promise to promote the Australian Shepherd as an all-around working dog and to abide by the Constitution, Bylaws, Registry Rules, Rules, Regulations, Code of Ethics, and Dispute Resolution Rules of both ASCA (Australian Shepherd Club of America) and RRVASC (Rock River Valley Australian Shepherd Club).

Signatures of all voting members on this application: (application will be returned to you if this section is incomplete)

Printed Name: _____

Printed Name: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

ASCA Member #: _____

ASCA Member #: _____

Names and Birthdates of Juniors: _____

Please return form & appropriate fees payable to **RRVASC** to:

Leanne Lieske

425 N Hine Ave.

Waukesha, WI 53188

PayPal: Rrvasc@carmelaussies.com