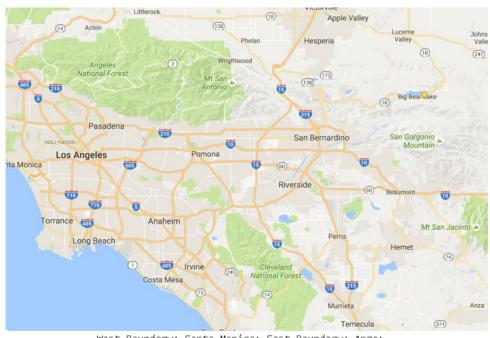


## Southern California Rat Terrier Club Membership Application Calendar Year - 2018



Name:				Occupatio	n (optional):			
Address:								
City:					State:	Zip Co	ode:	
Phone:			Email:					
Are you a breeder of AKC registe	red F	Rat Terrie	rs?		Yes	No		
OTHER HOUSEHO	)LD	MEMBER	R INFORMATIO	ON FOR HO	USEHOLD &	JUNIOR MEMBER	SHIP	
Name:				Occupatio	n (optional):			
Phone:			Email:					
Are you a breeder of AKC registe	red F	Rat Terrie	rs?		Yes	No		
REFERI	ENC	ES MUST	BE MEMBERS	IN GOOD S	STANDING			
First Reference:			Phone:		Email:			
Second Reference:		Email:						
TYPE OF MEMBE	RSH	IP REQU	ESTED (Associ	ates & Junio	ors do NOT	have voting privile	eges)	
Single (One vote): \$2	:5	Househo	old (Two votes):	\$ 35	Junior (Pare	ent signature required	): \$	55
Associate (One member):			\$20	Household	d Associate	Two members):		\$25
Method of payment: Cash			Check	•	PayPal (soca	alratterrierclub@gm	ail.com)	
I/We agree to receive notification	ition	of club i	meetings; due	s notices; m	ninutes and r	newsletters by	YES	
electronic transmission.			<b>G</b> .			•	NO	)
			MEMBER IN	NFORMATIC	ON			
Are you a Rat Terrier owner?	you a Rat Terrier owner? Yes No What Registry are yo						:	
Do you exhibit Rat Terriers in AKC?		Yes	No	AKC		UKC		
Are you a professional handler?		Yes	No	Other:				
Are you an AKC licensed judge?		Yes	No	Year of last	litter register	ed with AKC:		
-			CODE C	OF ETHICS				
I the undersigned ackno	owle	dge and a	agree that mem	bership in th	ne SCRTC is a	privilege not a right	, and that	
violations of this cod	e ma	ay result i	n disciplinary ad	ction up to a	nd including i	my/our expulsion fr	om the	
club, consistent with	ı the	club's by	-laws. As a cond	dition of mer	mbership in t	he Southern Califor	nia Rat	
Terrier Club I hereby	ackr	nowledge	that I have rea	d and under	stand and agi	ee to this Code Of I	Ethics. I	
accept this Code in its ent	irety	y and I agi	ree to be bound	by it. The co	ode of ethics	can be found on the	e website	at
			w.southercalifo		_			
SIGNATURES: If se	endi	ng electr	onically, pleas	se type s/ar	nd your nam	e on the signature	e line.	
Applicant Signature:						Date:		
Spouse Signature (household membership only):						Date:		
Parent Signature (Junior membership only):						Date:		
Please mail this application to: So or email to barbaraljordan@yaho							ent to you	r email.
To be filled out by Membership (	Chair	person <b>O</b> l	NLY					
Cash / Check# / PayPal Transaction	on#:							



West Boundary: Santa Monica; East Boundary: Anza; North Boundary: Apple Valley; South Boundary: Temecula