

HOVAWART CLUB OF NORTH AMERICA 2022 MEMBERSHIP RENEWAL



MEMBERS INFORMATION

Name: _____

Current address: _____

City:	State / Province:	Postal / ZIP Code:
E-mail	Home Number:	Cellular Number:

Is this the e-mail address you'd like associated with your Basecamp access? Yes

No, please use _____

HCNA PUBLIC MEMBERS LIST

HCNA Members List
We have public members list which will be accessible by your Basecamp login.
Members who opt into the public list will be sharing the following information: Your name, e-mail address, city, and state. You will be

If this question is left blank, we will presume you wish to be added to the list. Yes No

Would you like to be added to the public HCNA member's list for 2022?

HOVAWART INFORMATION

	1 st Dog	2 nd Dog	3 rd Dog
Registered Name:			
Call Name:			
Date of Birth:			
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Color:	Blond Black & Tan Black <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Blond Black & Tan Black <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Blond Black & Tan Black <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Dog is:	Spayed Neutered Intact <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Spayed Neutered Intact <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Spayed Neutered Intact <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Registered with:	<input type="checkbox"/> HCNA <input type="checkbox"/> FCI <input type="checkbox"/> AKC-FSS <input type="checkbox"/> UKC <input type="checkbox"/> Other: _____	<input type="checkbox"/> HCNA <input type="checkbox"/> FCI <input type="checkbox"/> AKC-FSS <input type="checkbox"/> UKC <input type="checkbox"/> Other: _____	<input type="checkbox"/> HCNA <input type="checkbox"/> FCI <input type="checkbox"/> AKC-FSS <input type="checkbox"/> UKC <input type="checkbox"/> Other: _____

MEMBERSHIP TYPES

After March 1st, an additional **\$10 late fee** payment will be added to the membership cost.

1 - Year Membership	<input type="checkbox"/> \$45.00
2 - Year Membership	<input type="checkbox"/> \$80.00

TERMS & CONDITIONS

In submitting this application I promise:

- To abide by the Constitution and By-Laws of Hovawart Club of North America
- Not to participate in any breedings that are not authorized by Hovawart Club of North America.

All memberships will be reviewed by the HNCA board for approval. Any membership not approved will be refunded the membership

PAYMENT

For Canadian and foreign members, please send bank drafts or money orders payable in US funds.
Please issue your check or money order payable to: **The Hovawart Club of North America** and return it with your completed form to: Matthew Douthat at 21 Grace Ave., Plattsburgh, NY 12901.