

Name			
Has there been any change in your co	ntact informat	ion? No Yes (please complete ch	anges below)
Address:			
Phone:	_ Email		
Membership Level (select one):			
Associate (non-voting)	\$25	Junior (10 – 17 years old) non-voting	\$0
Single (voting)	\$30	Honorary	\$0
Family (2 voting members)	\$40		
Additional Donations:			
Show/Trophy FundClub Activities (Fun Days/other)	\$ \$	- -	
Participation: Please refer to <u>www.stct</u> of committee activities, roles, and resp		embership and News on the header bar for a c	complete description
Please consider volunteering! Indicate	below where y	ou'd like to participate:	
		ute memorable, rewarding, educational, and for e Scottish Terrier ownership experience and b	
fundraising, budget, and purchasing an	nd to identify w	de information and recommendations to the brays to raise revenue. The W&M committee wis with purchasing, pricing, sales, and fundraising.	ill also function in a
	-	service providing additional opportunities for on the second of the seco	
Show Committee- To plan and excompetition.	xecute all aspe	ects of a successful specialty show with associa	ted sweepstakes
		e on a committee but want to be involved? Sel th details when the club or committees need h	•
RETURN this form by:			
Email to: stctbtreasurer@gmail.com			

23117 Gingerwood Loop Land O Lakes, FL 34639