



Pointer Club of Southern California Application for Membership

Date: _____

FULL NAME: _____
(Please print or type)

FAMILY MEMBER: _____

JUNIOR MEMBER (under age 18) _____

Telephone: _____ Fax: _____

Email: _____ Website: _____

Occupation: _____ Employer: _____

DO YOU OWN A POINTER (S)? _____ IF NOT, WHEN LAST? _____

REGISTERED NAME OF YOUR POINTER: _____

KENNEL NAME: _____

OTHER BREEDS YOU OWN: _____

DO YOU: SHOW? _____ Confirmation _____ Field _____ Obedience _____ Agility _____

Has the American Kennel Club ever revoked your privileges? _____

Has your membership in any dog club ever been refused or revoked? _____

Are you a member of the American Pointer Club? _____ Are you a member of any other dog clubs? _____

If Yes, which clubs: _____

Sponsor: _____ Telephone: _____

Sponsor: _____ Telephone: _____

I hereby apply for membership in the Pointer Club of Southern California and if approved, agree to abide by the Constitution and By-Laws and to the rules of The American Kennel Club. I enclose my membership for the calendar year.

Signed: _____ **Signed:** _____

(Note) Both applicants must sign if family.

ANNUAL DUES: FAMILY \$20.00

JUNIOR \$10.00 INDIVIDUAL \$15.00

Please send completed application
and check payable to PCSC to:

Susan Bleckley
327 Lugonia Street
Newport Beach, CA 92663
949-515-4454

FOR CLUB RECORDS
Date Received: _____
Date Read at meeting: _____
Date Published: _____
Date Notified: _____
Date Resigned: _____
Renewal Year: _____ Status Change _____