American Water Spaniel Information
(Please Use Additional Sheets as Necessary)

Please list all American Water Spaniels you now own: (use additional sheets if necessary)

Do you own any AWS? [ ] Yes [ ] No

AKC Reg. Name ____________________________ AKC Reg. No. (if none, AKC Litter Reg. No.)
Age: ____________________ Sex: ________ Spay/Neutered? [ ] Yes [ ] No

AKC Reg. Name ____________________________ AKC Reg. No. (if none, AKC Litter Reg. No.)
Age: ____________________ Sex: ________ Spay/Neutered? [ ] Yes [ ] No

Have you bred any AWS in the last 3 years? [ ] Yes [ ] No If yes, please provide for each litter the following:
AKC Litter Reg. No. ____________________________ Date Whelped ____________________________

Your Kennel Name (if applicable): ____________________________

Nov. 2016
Only 2020 New Associate Memberships

New Associate (Individual or Household) Membership. A New Associate Membership does not require the applicant(s) to be citizens or residents of the United States or the written endorsement of two members of the AWSC. An associate membership does not have voting rights.

Membership Type: [ ] Individual Associate Membership [ ] Household Associate Membership

Dues: [ ] First year dues waived. [ ] First year dues waived.

Please check a Membership Type above. Incomplete applications will be returned. Mail or email your completed application to:

Linda Hattrem
7529 Elayne Drive
Eau Claire, WI 54701
hattremjl@outlook.com

Your application for membership must be approved by the Board of Directors of the AWSC. This could take one to two months.

So that you can become an active member of the American Water Spaniel Club:

Please indicate your areas of interest.

_____Agility competition
_____Breeding
_____Hunting
_____Hunt tests
_____Pet
_____Rally
_____Showing in Conformation
_____Showing in Obedience
_____Therapy Dogs
_____Tracking competition

Would you be interested in helping with any of the following club activities?

_____Club Periodical
_____Hunt Tests
_____Training Days
_____Library
_____Pet fairs / game fairs
_____Publicity/ Promotion
_____Rescue
_____Show (National Specialty)
_____Web page
_____Other _______________________

Applicant Signature(s): By signing below, I/We are hereby applying for the membership type indicated in the application and certify that the information contained herein is true and correct. I/We also certify that we meet the eligibility requirements for the membership type chosen and have read and will abide by the Articles of Incorporation and Bylaws of the AWSC and the rules and regulations of the AKC.

Printed Name ______________________________ Signature ________________________ Date __________

Printed Name ______________________________ Signature ________________________ Date __________

The AWSC occasionally uses electronic mail to communicate with members and keep members informed about current developments in a timely manner. The use of electronic communications also reduces the expenses to the AWSC and helps keep dues low. Please check here if you do not wish to receive electronic communications from the AWSC. [ ]

Occasionally, the AWSC makes its mailing address list available to select groups or companies that are dog related. Please check here if you do not want your name released. [ ]

Annual dues run from Jan. 1 to Dec. 31.

Please complete the entire application so that there is no delay in processing. Thank you.

Official Use Only

Date Rec’d: __________, Ret Date: __________, Date Comp.: __________, BOD: __________, Appr’d: __________,