



**APPLICATION FOR MEMBERSHIP**

Dear Applicant,

Thank you for visiting our website and applying for membership. Please fill in this application form and submit it with a check made out to PVBMD (Potomac Valley Bernese Mountain Dog Club) for one year's dues. Each applicant must be sponsored by two current, unrelated Regular Members of PVBMD, and must attend two club meetings (or one meeting and one club event **excluding the club's Regional Specialty**) within one year of the date of this application. One of these functions must be after the application is submitted and read at a club meeting.

\* Members of other BMDCA Regional Clubs who wish to join should contact the Membership Chair for additional information.

\_\_\_ Primary Regular Member \$20

\_\_\_ Primary Associate Member \$15

\_\_\_ Additional Regular Member \$5

\_\_\_ Additional Associate Member \$5

Regular Member: voting member who attends most general meetings, receives newsletter.

Associate Member: non-voting member who enjoys and supports club activities, receives newsletter.

**Applicant's Name:** \_\_\_\_\_

\_\_\_\_\_ *(Name of Primary Household Member)*

Mailing Address: \_\_\_\_\_

City : \_\_\_\_\_

State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation (Current or pre-retirement): \_\_\_\_\_

What skills can you bring to the club? \_\_\_\_\_

**Mark Your Areas of Interest:**

Fun Stuff (Outings & Programs) \_\_\_ Breeding \_\_\_ Conformation \_\_\_ Obedience \_\_\_ Agility \_\_\_ Tracking \_\_\_

Drafting \_\_\_ Rally \_\_\_ Health, Care & Feeding \_\_\_ Help/Host Club Activities: \_\_\_ Other: \_\_\_\_\_

**Have you ever registered a litter with any registry?** \_\_\_ **If yes, breed:** \_\_\_\_\_ **# of litters in past 3 years:** \_\_\_\_\_

**Name of Registry** \_\_\_\_\_ **At an AKC licensed dog show have you ever been a handler?** Yes \_\_\_ No \_\_\_

**Judge?** Yes \_\_\_ No \_\_\_ **Do you compete with your dogs?** Yes \_\_\_ No \_\_\_ **If yes, please check which of the following:**

Conformation \_\_\_ Obedience \_\_\_ Rally \_\_\_ Tracking \_\_\_ Agility \_\_\_ Drafting \_\_\_ Herding \_\_\_

**Volunteering: in what areas would you like to help your club?** Matches (conformation/obedience) \_\_\_ Drafting Trials \_\_\_

Outings & Programs \_\_\_ Trophies \_\_\_ articles for Newsletter \_\_\_ Our Specialty \_\_\_ Photography \_\_\_ Steward \_\_\_

Help on a committee \_\_\_ Ways and Means: \_\_\_ Other: \_\_\_\_\_

Are you a current \_\_\_ former \_\_\_ member of the BMDCA? Are you currently on AKC or BMDCA suspension? Yes \_\_\_ No \_\_\_

Do you have an active membership in any other dog club? If yes, please name: \_\_\_\_\_

Are you or have you ever been an officer in a dog club? Yes \_\_\_ No \_\_\_ If yes, what office(s): \_\_\_\_\_

Are you interested in serving as a club officer? Yes \_\_\_ No \_\_\_

**\*\*\*\*On the reverse side please tell us a little about yourself, family and your Berners so that we can introduce you in our newsletter\*\*\*\***

*With the view of the betterment of the breed of dog known as the Bernese Mountain Dog, I agree to abide by the rules and regulations, constitution and by-laws of the Potomac Valley Bernese Mountain Dog Club Inc. and rules of The AKC.*

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Sponsors:** *MUST be sponsored by two unrelated PVBMD C members who are in good standing and are not related to you.*

**Sponsor's Name (Printed):**

**Sponsor's Signature:**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Bernese Mountain Dogs owned currently:**

Registered/Call Name: \_\_\_\_\_ Sex: \_\_\_ AKC Number: \_\_\_\_\_ Breeder: \_\_\_\_\_

Sire: \_\_\_\_\_ Dam: \_\_\_\_\_

Registered/Call Name: \_\_\_\_\_ Sex: \_\_\_ AKC Number: \_\_\_\_\_ Breeder: \_\_\_\_\_

Sire: \_\_\_\_\_ Dam: \_\_\_\_\_

**\*\*\*More dogs? Please enter their information on the back of the application\*\*\*\***

**PVBMD C By-Laws allows the club to send out e-mail notification of club meetings as well as special notices. If you agree to receive these club notifications via the PVmember e-list, please sign below:**

**Signature:** \_\_\_\_\_

**Please mail this application with your check made out to PVBMD C, Inc. to**

**Georgeann Reeve  
42220 Heaters Island Court  
Leesburg, VA 20176**

*For Club Use Only:*

Date Application received: \_\_\_\_\_ Date Check Received \_\_\_\_\_ Check # \_\_\_\_\_ Amt: \_\_\_\_\_

Dues for Year of \_\_\_\_\_ Date added to newsletter list: \_\_\_\_\_ Date of Meeting Applicant's Name Read: \_\_\_\_\_

Membership Type: Regular \_\_\_ Associate \_\_\_ Meeting attended: \_\_\_\_\_ Event attended: \_\_\_\_\_

Application voted on: \_\_\_\_\_ Date Welcome Packet Given: \_\_\_\_\_ Date added to Newsletter \_\_\_\_\_