

# AMERICAN BELGIAN MALINOIS CLUB MEMBERSHIP APPLICATION

### \*\*\*\*\*\*INSTRUCTIONS\*\*\*\*\* PLEASE READ

#### To ensure your application is processed as quickly as possible:

- Write clearly with black or blue ink or type the application.
- Complete fully each section.
- Obtain sponsorship from two current club members who have been members for at least one year.
- Make checks payable to "ABMC".
- Sponsors may email their individual sponsorship forms directly to ABMC Treasurer, Suzanne Belger (desertmtnmalinois@gmail.com).
- If you'd like to pay the application fee electronically, please contact Suzanne to make arrangements.

#### Sponsors:

If you do not know anyone who is a club member, send an email through the club website – <a href="webmaster@malinoisclub.com">webmaster@malinoisclub.com</a> or contact the membership chair directly (Sara Andersen – <a href="sara.andersen3@gmail.com">sara.andersen3@gmail.com</a>). She will help you with meeting people in your area and finding sponsors.

#### Return completed application, 2 sponsorship forms, and fees to:

Suzanne Belger 994 Lowell Dr

Idaho Falls, ID 83402

Email: desertmtnmalinois@gmail.com

#### Fees:

Regular Membership \$40 Junior Member <18 yrs. \$10 Family - 2 same household \$65

1st Class & Overseas Postage for Performer - add \$15

#### The Process:

If your application is complete, you will receive an email notifying you of its receipt. Your name and contact information must be printed in our club publication, The Performer. The Performer comes out bimonthly in even months, with the deadline on the 10<sup>th</sup> of the previous odd numbered month. (Feb/March issue deadline is Jan 10, etc.) At the first Board of Directors meeting after the publication, you will be voted on. If any members object to approval, your membership will be tabled until the annual meeting whereby your sponsors may present the application. It must gain 75% approval by secret ballot (see Article I, Section 3 of the Constitution).



#### AMERICAN BELGIAN MALINOIS CLUB

### **MEMBERSHIP APPLICATION (multiple pages)**

Membership is open to all persons who subscribe to the purposes of the club and are in good standing with the American Kennel Club. With the exception of Juniors, members must be at least 18 years old.

PLEASE COMPLETE THE FORM IN BLACK OR BLUE INK ONLY. PRINT OR TYPE THE ENTIRE APPLICATION EXCEPT WHERE SIGNATURES ARE REQUIRED. The section in red must be signed if you are willing to receive club information via email.

#### **GENERAL**

Applicant Name(s) (please print)				
Street Address	City	State	Zip Code	
Email Address(es)				
Phone Number(s) Home	Cell		Work	
Publish in directory? Y N	Publish in directory? Y	N Publis	sh in directory? Y N	
Occupation(s)				
Date of Birth – Junior Members On  I authorize the ABMC to send offici the Club have a signed authorizatio official ABMC communication.	ial communication to me by e	,		
☐ Yes Signature:(Your electronic signature is the legal equivalent)				
□ No, I wish to only get information through the postal system.				
QUESTIONS				
Are you in good standing with the A  ☐ Yes ☐ No  What led to your interest in the Bele				

From whom did you acquire your Malinois?				
Number of Malinois currently owned:				
Niveshan of vacuation than because				
Number of years in the breed:				
What activities do you currently participate in with your Ma	linois? (e.g. obedience, conformation, agility,			
tracking, ring sport, IPO, herding)				
Other describe officiations				
Other dog club affiliations:				
Why do you want to join the ABMC?				
We appreciate those who will actively support the club's a				
willing to support for the club? (Specialties, raffles, chairir				
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## ABMC MEMBER APPLICATION SPONSORSHIP FORM

#### \*\* SPONSOR QUALIFICATIONS\*\*

In order to sponsor an applicant for ABMC Membership, you must have been an ABMC Member in good standing for a period of at least 1 year. Sponsorship is valid for a period of 1 year from the date of signing. Sponsors cannot reside in the same household as the applicant or another sponsor.

Name of applicant you are sponsoring:	
How long have you known the applicant?	
How did you meet the applicant?	
Why do you recommend the applicant for ABMC Membership?	
Any other information about the applicant you'd like to provide?	
Sponsor Name (Print) Sponsor Signature (Your electronic signature is the legal equivalent)	Date

Mail or Email to:

Suzanne Belger 994 Lowell Dr Idaho Falls, ID 83402

Email: desertmtnmalinois@gmail.com



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