

RTCA MEMBERSHIP APPLICATION

RENEWAL _____ RAT TERRIER CLUB OF AMERICA NEW MEMBERSHIP _____

Name:		Occupation	
Address:	City:	State:	
Zip Code:	Phone:		
Email:	Website:		
Kennel Name :			

TYPE OF MEMBERSHIP REQUESTED

We offer different types of membership please select below what category you would like to be listed as.

*Associate: (<i>Member without voting privileges</i>) _____ \$25 per calendar year		*Foreign Countries/Overseas
Junior: _____ \$15 per calendar year (<i>No Vote</i>)	Household: _____ \$35 per calendar year (<i>Two Votes</i>)	RTCA Breeder Web Ad: _____ \$25 per calendar year
Single: _____ \$25 per calendar year (<i>One Vote</i>)		

REFERENCES (DISREGARD THIS SECTION IF THIS IS A RENEWAL)

First Reference:	Address:	Phone:
Second Reference:	Address:	Phone:
Email First Reference:	Email Second Reference:	

SIGNATURES: First Reference: _____ Second Reference: _____

SPOUSE INFORMATION IF HOUSEHOLD MEMBERSHIP

Name:		Email:	
City:	State	Zip Code:	Phone:

WHY DO YOU WISH TO BE A MEMBER OF THE RTCA WHAT CAN YOU VOLUNTEER FOR

CODE OF ETHICS

I the undersigned acknowledge and agree that membership in the RTCA is a privilege not a right, and that violations of this code may result in disciplinary action up to and including my/our expulsion from the club, consistent with the club's by-laws. As a condition of membership in the Rat Terrier Club of America I hereby acknowledge that I have read and understand and agree to this Code Of Ethics. I accept this Code in its entirety and I agree to be bound by it.

SIGNATURES

Please send this application to: RTCA MEMBERSHIP JORDON LEIGH P.O. BOX 12 LOMA CO 81524

Applicant Signature:	Date:
Spouse Signature (<i>only for a household membership</i>):	Date:

***All Applications are subject to approval by the RTCA BOD before membership is in effect.
 **Applicant can ad second sheet if needed for cover letter.