



MEMBERSHIP 2018

TALLAHASSEE HUNTING RETRIEVER CLUB, INC.

Annual Membership Fees _____ \$35.00 Working Club Member _____ \$70.00 Non-Working Club Member

Name:		Date:
Spouse Name:		Phone:
Address:	City:	
E-mail:	Mobile: ()	
Dog Breed(s):		
Call me to help _____ at the Spring Hunt test _____ Fall Hunt test _____		
<div style="background-color: #e0e0e0; padding: 2px;">This information is for membership renewal for working members.</div> I volunteered or served on the following committees in 2017: _____ _____ _____		
For club use only)	Check #:	Date :

PLEASE COMPLETE if you have more than one address _____ Summer _____ Winter

Name:		E-mail:
Address:		Phone: ()
City:	State:	Zip:
May we publish your phone number in our membership directory? _____ Yes _____ No		

Make check payable to THRC and mail to:

**Tallahassee Hunting Retriever Club
P.O. Box 12541
Tallahassee, FL 32317**

_____ hereby agree to abide by the rules and regulations of the American Kennel Club and the by-laws and Constitution of the Tallahassee Hunting Retriever Club, Inc.

I/we the undersigned, hereby agree that the Tallahassee Hunting Retriever Club and owner, shall not be held responsible for any injury that I or my dog might receive while training on Borderline/Springhill Plantation or being trained by the Tallahassee Hunting Retriever Club, and further agree to pay for any injury or damage that my dog may do to the other animals or persons or property while on Borderline/Springhill Plantation.

Signature of _____