

# Cirneco dell'Etna Club of America

## Membership Application

Membership allows individuals to help the Club preserve the ancient form and dignity of the Cirneco as well as support events and rescue activities sponsored by the Club. It is open to all persons who subscribe to the purpose of CdECA and support the Club's mission and goals. Members must be in good standing with the Club, AKC, ENCI, and/or FCI, as appropriate, and, by virtue of their involvement with and commitment to the Cirneco dell'Etna, show their dedication to the goals and objectives of the Club as outlined in the By-laws.

Membership Application Category:		<input type="checkbox"/> Individual	<input type="checkbox"/> Junior	<input type="checkbox"/> Newsletter
First Name:		Last Name:		
Address:				
City:		State:	Zipcode:	
Email:				
Hm Phone:		Cell Phone:	Wk Phone:	
<input type="checkbox"/> Professional Handler <input type="checkbox"/> Breeder <input type="checkbox"/> Exhibitor <input type="checkbox"/> Pet Home <input type="checkbox"/> Other: _____				
PRIVACY				
May we share your telephone number with club members?		Y/N	Note:	
May we share your email address with club members?		Y/N	Note:	
May we post your email address on the CdECA website?		Y/N	Note:	
May we contact you at work?		Y/N	Note:	
HOW DID YOU FIND OUT ABOUT THE CIRNECO DELL'ETNA? WHAT ATTRACTED YOU TO THE BREED?				
WHY DO YOU WANT TO JOIN THE CIRNECO DELL'ETNA CLUB OF AMERICA?				
FOR CIRNECHI OWNED, CO-OWNED, AND/OR CURRENTLY LIVING WITH YOU, PLEASE PROVIDE:				
Name		Registration No		Sex

PLEASE PROVIDE ALL REQUESTED INFORMATION—ATTACH ADDITIONAL SHEETS IF NEEDED

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OTHER DOGS OR CATS UNDER YOUR GUARDIANSHIP				
Dog/Cat	Registered Name	Registration No	Sex	Date of Birth

FROM THE FOLLOWING AREAS FOR INVOLVEMENT INDICATE THOSE IN WHICH YOU ARE/WOULD BE INTERESTED			
<input type="checkbox"/> Pet Guardian/Rescue	<input type="checkbox"/> Community Involvement	<input type="checkbox"/> Conformation Events	<input type="checkbox"/> Hunting
<input type="checkbox"/> Obedience	<input type="checkbox"/> Agility	<input type="checkbox"/> Breed Education	<input type="checkbox"/> Lure Coursing
<input type="checkbox"/> Breeding	<input type="checkbox"/> Stud Service	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

DESCRIBE YOUR INVOLVEMENT WITH OTHER BREEDS, CURRENT TO PAST INCLUDING TITLES ATTAINED, CLUB MEMBERSHIPS AND COMMITTEES THAT YOU HAVE WORKED ON

ARE YOU WILLING TO WORK ON A CDECA PROJECT OR COMMITTEE? ☐ YES ☐ NO  
 IF YOU ANSWERED YES, WHAT ARE YOUR AREAS OF INTEREST

ADDITIONAL COMMENTS

**For INDIVIDUAL Membership Applicants ONLY**  
 NAMES OF THE TWO SPONSORS SUBMITTING BY SEPARATE COVER ON YOUR BEHALF

Sponsor:	Sponsor:
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My signature attests to the accuracy and completeness of the information here submitted and affirms that I accept and agree to abide by CdECA's By-laws and support the club's mission.

Signature of Applicant:	Date:
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PLEASE PROVIDE ALL REQUESTED INFORMATION—ATTACH ADDITIONAL SHEETS IF NEEDED