

# **Sandalfoot Keeshond Club of Central Florida**

## **Membership Requirements**

### **Individual Membership**

- Must be 18 years of age.
- Fill out membership application and give to the Membership Chairman.
- Have two SKCCF member sponsors or have the Board act as one or both of the sponsors.
- Read the Code of Ethics and Constitution and By-Laws and agree to abide by them.
- Pay \$15 for membership dues.
- Upon becoming a member, you must attend at least 1 meeting or perform 3 hours of service to the club a year to maintain.

### **Family Membership**

- Two people in the same household both at least 18 years of age.
- Fill out membership application and give to the Membership Chairman.
- Have two SKCCF member sponsors or have the Board act as one or both of the sponsors.
- Read the Code of Ethics and Constitution and By-Laws and agree to abide by them.
- Pay \$20 for membership dues.
- Both members will have separate votes.
- Upon becoming a member, you must attend at least 1 meeting or perform 3 hours of service to the club a year to maintain.

### **Booster Membership**

- No age requirement.
- Fill out membership application and give to the Membership Chairman.
- Have two SKCCF member sponsors or have the Board act as one or both of the sponsors.
- Read the Code of Ethics and Constitution and By-Laws and agree to abide by them.
- Pay \$10 for membership dues.
- No voting rights.

# Sandalfoot Keeshond Club of Central Florida

## Membership Renewal Form

One-year dues payment (\$10 for Booster - \$15 for individual - \$20 for family) must accompany the application. Renewal Forms not filled out completely, signed by applicant(s), or accompanied by dues payment will be returned. **Please make checks out to Sandalfoot Keeshond Club of Central Florida (or SKCCF).**

\_\_\_\_\_  
LAST NAME (**PRINT**) FIRST NAME

\_\_\_\_\_  
LAST NAME (**PRINT**) FIRST NAME

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP CODE

\_\_\_\_\_  
COUNTY

\_\_\_\_\_  
KENNEL NAME (IF ANY)

\_\_\_\_\_  
EMAIL ADDRESS

\_\_\_\_\_  
PHONE NUMBER

If you were a full member last year, but did not fulfill membership requirements, you **must** renew as a Booster member. If you fulfilled full membership requirements as a Booster member, you may renew as an individual or family member.

**[Check one] Booster Membership** \_\_\_\_\_ **Regular (18 years or older)** \_\_\_\_\_ **Family (two persons)** \_\_\_\_\_

1. Would you like to be listed on the website as a recommended breeder? \_\_\_\_\_  
(A home visit must be done before a listing will occur.)

2. Would you like to volunteer to be on a committee? \_\_\_\_\_

If so, which one?

\_\_\_\_\_ Education

\_\_\_\_\_ Match

\_\_\_\_\_ Publicity

\_\_\_\_\_ Rescue

\_\_\_\_\_ Trophies & Awards

\_\_\_\_\_ Ways & Means

The undersigned hereby applies for membership in the Sandalfoot Keeshond Club of Central Florida. I (we) agree to be governed by the Rules of AKC and the Bylaws of the Club; to further its objectives therein and to conduct all activities with the Breed in accordance with the Code of Ethics printed on the reverse side of this application.

\_\_\_\_\_  
Signature of Applicant(s)

\_\_\_\_\_  
Signature(s) of Applicant(s)

\_\_\_\_\_  
Date

Please mail application and sponsors' letters to: **Karen Staats, Membership Application Coordinator**  
**301 Bent Way Lane, Lake Mary, FL 32746**