

CANADIAN RING ASSOCIATION

2004 MEMBERSHIP APPLICATION

Name _____ 2003 Membership # _____

Address _____

Phone # (_____) _____ Fax # _____

Email _____

Club Affiliation _____ Independent ()

2004 Fees: Cdn\$50.00 for a renewing member (must renew prior to March 1st, 2004)
Cdn\$75.00 for a new member or late renewal
Cdn\$25.00 for a spousal membership*

* Spousal membership entitles a member's spouse (married or common-law) to join the CRA for Cdn\$25 with full privileges (i.e. they will be issued their own CRA membership card/number with full membership rights)
Persons joining as a member and spouse will only have one newsletter mailed to their address.

Please send check or money order (payable in Canadian funds), made payable to the Canadian Ring Association in care of :

Lydia Nelles
420 – 16233 82nd Avenue
Surrey, British Columbia, Canada
V3S 8T5
Phone: (604) 596-9303
e-mail address: vlnelles@shaw.ca

As a C.R.A. member you are entitled to:

1. Newsletter
2. Voting privileges (non-board issues)
3. Purchase score books
4. Compete in any Frenchring / Mondioring trial recognized by the C.R.A.
5. C.R.A. recognizes all countries sanctioned Frenchring and Mondioring.
6. Non-Canadian members cannot represent Canada internationally.
7. Free C.R.A. Web page services and advertising.

I solemnly swear to conduct myself in a sportsmanlike manner.

WAIVER

I fully understand that my participation in Frenchring / Mondioring is at my own risk and I will seek medical advice from a doctor before doing so. I understand the Canadian Ring Association makes no claims as to the suitability of Frenchring / Mondioring for my dog(s) or myself. I, for myself, my heirs, executors, administrators, successors and assigns, do release and forever discharge the Canadian Ring Association, its Officials, its clubs and members from all manor of actions, claims, demands or damages whatsoever which may have arisen or may in the future arise for or by reason of any damage, loss or injury to property or person (including death) which I have sustained or which I may in the future sustain, in the consequence of my participation in Frenchring / Mondioring.

I have read the foregoing and I understand it. Any questions that have arisen or occurred to me have been answered to my satisfaction.

Name (print) _____ Name (signature) _____

Date _____ Witness (signature) _____

CANADIAN RING ASSOCIATION

SCORE BOOK APPLICATION

Dog's Registered Name _____ Breed _____

Dog's Registration # _____ Registry _____

Tattoo # _____ Location of Tattoo _____

Sex M F Color _____ DOB _____

ENCLOSE:

1. Check for \$25 (Can) made payable to the Canadian Ring Association

2. Copy of dog's registration papers

SEND REQUEST TO C.R.A. SECRETARY:

Brenda Noseworthy

35 Somercrest Manor SW

Calgary, Alberta

T2Y 3C3

Phone & Fax: (403) 256-9036

E-mail address: cdnring@shaw.ca

Owner's Name _____ C.R.A. Membership # _____

Address _____

Phone # (____) _____ Fax # _____ E-mail _____

I understand the above information to be complete and correct. Copies of information supplied to the C.R.A. are from authentic and/or registered documents. Attempts to falsify documents or information to the C.R.A. will result in suspension of the dog and owner.

I solemnly swear to conduct myself in a sportsmanlike manner.

Name (signature) _____ Date _____