



The Colorado Portuguese Water Dog Club
2024 Complimentary Membership Application
(applies for the balance of the calendar year)

Your application is pending until the membership has approved it - you will be notified once that has been done.

Applicant Name: Phone (Home):
Additional Household Member Name: Phone (Work):
Junior Member (18 years or younger): Phone (Cell):
Address (home): E-Mail:
City State Zip Occupation

NOTE: The COPWDC respects your privacy. This information will not be shared or sold to other organizations or businesses.

CODE OF CONDUCT

I will be respectful of all fellow club members and will demonstrate the principles of good sportsmanship. I will be a responsible dog owner and provide a safe, healthy environment for all of my animals. Only humane methods will be used when training, exhibiting or working my dogs.

Membership is open to all persons who subscribe to the purposes of the COPWDC. Members of AKC and/or PWDCA must be in good standing with these organizations when applying for COPWDC membership. I/We hereby apply for membership in the Colorado Portuguese Water Dog Club.

I/we have read and understand the above and agree to abide by same as indicated by my signature below. I/we have have never been a member of the Colorado PWD Club.

Applicant Signature: Date:
(Individual, 1st Family Member, or Junior)

Applicant Signature: Date:
(2nd Family Member or Guardian)

PWD Acquisition Information

My/our newest PWD was purchased from a PWD breeder or obtained from another source, as indicated following:

Breeder Name or Other: Acquisition Date:

Purchase or Other Acquisition Details:

PLEASE ALSO COMPLETE THIS PAGE FOR OUR RECORDS

Indicate your preference:

- I would be interested in serving on the COPWDC board
- I would be interested in participating on one of COPWDC's Committees:
 - Education Water Trial Supported Entry (conformation dog show)
 - Annual Picnic Awards Banquet Membership Events Bylaws Communications
 - Other: _____

I plan to participate or assist in the following: Agility Obedience Water Work Rally
 Tracking Therapy Conformation Nose work Search & Rescue

Regarding your new PWD

AKC Name _____

Call name _____ Age _____

AKC # _____

Please list below any areas of expertise that would be helpful to the club, i.e., computer skills, artistic/advertising, writing/newsletter, financial, event planning, hospitality, etc.: _____

Submit this application (fax or e-mail attachment preferred) to:

Fred Forman
Membership Chair
16501 Las Brisas Drive
Broomfield CO 80023-8069
E-mail: pwdinfo@copwdc.org
Fax: 508-664-7700
www.copwdc.org

Rec'd _____
Check # _____
D.B. _____
Directory _____
Announce list _____
Chat list _____