

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. I understand that the foremost reason for the COPWDC's existence is to help each of us gain greater enjoyment of our PWDs, become better educated about our breed, and support the breed in any way we can.

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 certify that the information supplied in this application is complete and correct; and I understand that any omission or misstatement herein can be grounds for rejection of this application or immediate termination of membership. I agree to abide by the Constitution, Bylaws, and policies of COPWDC, and the rules of the AKC.

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, 1 <sup>st</sup> Family Member, or Junior)		
Applicant Signature:	Date:	

## **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:

<ul> <li>I would be interested in serving on the COPWDC board</li> <li>I would be interested in participating on one of COPWDC's Committees:         <ul> <li>Education</li> <li>Water Trial</li> <li>Supported Entry (conformation dog show)</li> <li>Annual Picnic</li> <li>Awards Banquet</li> <li>Membership</li> <li>Events</li> <li>Bylaws</li> <li>Communications</li> <li>Other:</li> </ul> </li> </ul>					
I plan to participate or assist in the following: D Agility D Obedier D Tracking D Therapy D Conformation D Nose work D Search & Rescu					
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., com writing/newsletter, financial, event planning, hospitality, etc.:					
Submit this application (fax or e-mail attachment preferred) to:					
Fred Forman	Rec'd				
Membership Chair	Check #				
16501 Las Brisas Drive	D.B				
Broomfield CO 80023-8069	Directory				
E-mail: <u>pwdinfo@copwdc.org</u>	Announce list				
Fax: 508-664-7700					

Chat list

www.copwdc.org