

COMPLIMENTARY ASSOCIATE MEMBER APPLICATION

An Associate Membership shall be open to persons 18 years of age or older. They shall enjoy all the privileges of the club except the right to vote and hold office. Members receive the ACA Newsletter bi-monthly and may attend the ACA Annual Meeting held during the club's National Specialty. The club's Constitution, By-Laws and Code of Ethics are on the club's website: www.affenpinscher.org

PLEASE PRINT

Name(s): _____

Address: _____

Preferred Phone: _____

Email: _____

PLEASE READ THE FOLLOWING CAREFULLY:

I agree to abide by the Constitution, Bylaws, and Code of Ethics of the Affenpinscher Club of America, Inc., and the rules of the American Kennel Club. At all times and under all circumstances I will consider the welfare and best interests of the Affenpinscher breed and of the dogs I keep, breed, exhibit, sell, participate with at canine sport events and maintain in all such activities the highest standards of ethical conduct. An Associate member may not claim their membership in the Affenpinscher Club of America in any advertisement, web listing or other form of public communication as a qualification or factor in the placement, sale or transfer of any Affenpinscher. This includes but is not limited to Breeders Listing on the AKC or other web sites. I have read and understand the ACA Membership Policy and Procedure and do share and uphold the objectives of its Statement of Membership Policy.

Signature(s): _____

Date: _____

Submitted by: _____ Organization: ACA ARA

Send to: Donna Wolfe
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Highland Village, TX 75077
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