



Application for Membership

CONESTOGA VIZSLA CLUB INC.

To The Board of Directors:

I hereby apply for membership in the Conestoga Vizsla Club, Inc. and agree to support the constitution and By-laws of the Club; to encourage high standards in breeding, training, and showing Vizslas; and to promote the welfare of the Vizsla breed.

Applicant: _____

Sponsor*: _____

Address: _____

Occupation: _____

Home Phone: _____

Work Phone: _____

E-mail: _____ (E-mail is used for Club matters only)

Vizslas: I now own _____ Vizslas (_____ males and _____ females)

Membership Type:

Membership in the Conestoga Vizsla Club, Inc. entitles me to a voice in all club policies and a vote in all club elections. Membership dues are \$30.00 (family), \$25.00 (Single) per year, \$20.00 (Subscription Only). Subscription only is NOT a voting member of CVC. The club year runs from January through December. Membership includes a subscription to the CVC Newsletter.

Please find _____ enclosed for this year's membership.

Signature: _____

Date: _____

To submit your Application, print and complete this form, sign and date it, and mail it to:

Gail Contreras
Membership
4408 Santa Clara Court
Fairfax, VA 22030

Don't forget to include your check made payable to the "Conestoga Vizsla Club" or "CVC".

***Please note: Applicants must have a sponsor. If you do not have a sponsor please contact Gail Contreras at 703-352-8109 or gaygle@aol.com.**