



**Walla Walla Kennel Club Membership Renewal**  
**PO Box 157**  
**Walla Walla, WA 99362**

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ (this number will not be shared with non-members or appear on the web site)

Email address: \_\_\_\_\_

Type of Membership

Individual \_\_\_\_\_ \$10.00

Family \_\_\_\_\_ \$15.00

Junior \_\_\_\_\_ \$ 10.00

Breed Interests:

\_\_\_\_\_  
\_\_\_\_\_

Areas of Dog Activities or interests: (e.g. Conformation, Obedience)

\_\_\_\_\_

Please indicate areas in which you would be willing to participate or tell us of any special talents you have \_\_\_\_\_

\_\_\_\_\_

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

An Individual Junior Member must have the signature of a Guardian

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

Return this completed application form with the required dues attached to the next general meeting or mail it to the above address.