



Membership Application Form

Date: _____

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Phone - Home: _____

Phone - Cell: _____

Occupation: _____

Kennel Name (if applicable): _____

Please state your interest in Boxers (conformation, obedience, agility, breeder, etc., etc.):

Membership Type:

- Family - \$25.00
 Individual - \$15.00
 Associate - \$10.00
 Junior - \$10.00

Recommended By (two current members required):

By signing this application, I/we agree to abide by the Constitution and By-laws of the Allegheny Boxer Club, Inc., the Code of Ethics of the American Boxer Club, Inc., and the rules of the American Kennel Club.

(applicant signature)

(co-applicant signature)

Return application, with fee, to Membership Chairperson:
(Note: Checks can be made payable to "Allegheny Boxer Club")

Annette Mucci, Membership Chair
159 Klinger Rd
Canonsburg, PA 15317

E-mail: canine.inspirations@yahoo.com
Mobile: (412) 260-3042