

Mid-Florida Cavalier King Charles Spaniel Club
***Membership Renewal Form**

*All information must be completed and legible or the application will be returned.

Name: _____ DOB: _____
Month/Day

Address: _____

City: _____ State: _____ Zip: _____

Phone/Home : _____ Cell: _____ Work: _____

Email Address: _____ Kennel Name/Prefix: _____

Breeder: _____ Exhibitor: _____ Pet Owner: _____ Handler: _____

(Check all that apply)

In what areas of the Club are you interested? Holding Office _____, Membership _____, Rescue _____, Health _____, Fund Raising _____, Matches _____, or Other _____.

Type of Membership Being Renewed:

(Please provide check number after appropriate selection)

Regular (voting rights) - \$30.00 _____. Regular Membership requires attendance at 2 meetings per year.

Regular Household (one vote) - \$40.00 _____. Junior (no voting) - \$15.00 _____.

Associate (no voting/pet owner) - \$15.00 _____. Associate Household (no voting/pet owner) - \$25.00 _____.

Membership runs from January 1 through December 31, with all dues payable on or before Jan 1st. Any dues in arrears after Jan 31st, results in re-application process for membership (no exceptions; see By-Laws).

Remit appropriate fees, payable to MFCKCSC, to:

Valerie S Cromer
Membership Chairman
7605 Nottingham Sky Dr
Apollo Beach, FL 33572
813-545-6021

All information above must be provided for annual updating of Club Roster for AKC and Club use only, and will not be released to third parties. Any information left blank will result in returning application for completion.

The following notification from AKC must be read and authorized by member signature, that you agree to the notification:

Clubs may send members notification of club meetings, board meetings via email provided that each member agrees to this method of communication by providing authorization signature. Such authorization releases the MFCKCSC from any liability should the notification not be received or received late by member or members due to circumstances beyond the Clubs control.

I agree to receive email notification: _____.

Signature required

Mid-Florida Cavalier King Charles Spaniel Club, Inc.

**Attn: Valerie Cromer
Membership Chairman
7605 Nottinghill Sky Dr
Apollo Beach, FL 33572**

Payment Invoice

Membership Dues

Regular: \$30.00; Reg. Household \$40.00; Associate: \$15.00;
Assoc. Household: \$25.00; Junior; \$15.00 \$ _____

Breeder Referral Page

Available only to Regular and Regular Household Members: \$25.00 \$ _____

Donation

All Donations will be distributed evenly between the General
Account and the Rescue Fund. Please give generously. \$ _____

Total amount of check

Please note: Checks returned for any reason will be subject to the
appropriate bank fees under Chapter 832 of the Florida Statutes. \$ _____

Please make checks payable to MFCKCSC, Inc.