



UKC NEW CLUB APPLICATION

Mail to: UKC - All-Breed Sports
100 E Kilgore Rd, Kalamazoo MI 49002-5584
Fax: 269.349.5590 Email: clubs@ukcdogs.com

There is a \$50 non-refundable application fee for all New Club Applications.

Name of Club Club

Location (City, State)

Date Organized _____ Number of club members _____

How many club members own UKC Registered dogs? _____

How many club members own UKC Titled dogs? _____

Please indicate the number of members with UKC titled dogs in the following areas:

Agility _____ Conformation _____ Dock Jumping _____ Lure Coursing _____ Weight Pull _____

Nosework _____ Obedience _____ Rally Obedience _____ Drag Racing _____ Precision Coursing _____

Is the club licensed by another registry? Yes No If yes, which one? _____

Are there any other UKC dog clubs of the same type as your club in the same area? Yes No

If yes, please list each club

If yes, is it possible to combine clubs? If not, please explain the reasons for another licensed club in the area.

What licenses are being applied for?

There must be a minimum of three (3) club members with the initial title earned in each event type being applied for. (i.e clubs applying for a conformation license must have 3 members who have titled a dog to the CH title.) *Nosework requires a minimum of 5 members who have titled dogs in nosework.

- Agility Conformation Single Breed (breed name) _____ / Conformation All-breed
 Dock Jumping Lure Coursing Nosework Obedience Rally Obedience Drag Racing Weight Pull Precision Coursing

Has the club adopted a set of Constitution and By-laws? Yes No

(If yes, please submit a copy with this application.)

Code of Ethics Adopted? Yes No

(If yes, please submit a copy with this application.)

For UKC use only:

Date Received _____ Date Processed _____ By _____

Credit Card Approval Code/ Transaction ID # _____ Bookkeeping Date _____



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Club Resume

Provide a club resume detailing the club's knowledge and experience with hosting competitive dog events, or hosting club "Fun Matches," and what types. If they were held under UKC format, how many and how often? Include any additional experience in hosting other types of events from other organizations. The resume must also include club functions (other than meetings and fun matches) such as community involvement and educational programs. If your club publishes a newsletter, please provide us with a copy.

Please include the following information with this application

1. Any additional Club Officers and a Board of Directors List if different from the Club Officer List. Include complete address and phone numbers.
2. Club Membership List. Include all contact information and indicate which members have experience in event type(s) being applied for.
3. Application for club membership if the club requires a new member to complete an application.
4. Record of club meetings. Please include meeting minutes from the last two meetings.
5. Information, including site maps, about potential show sites for future events. List all venues used for past matches and any prospective event locations.

Include any additional information the club deems important.

With the acceptance of this club application, United Kennel Club will mail a UKC Event Manual to the corresponding officer for the club's use.

Payment information

If paying by **check**, please make payable to United Kennel Club (UKC).

Credit Card (major credit cards accepted)

Credit Card Number Expiration Date

Cardholder's Printed Name

Cardholder's Address City, State, Zip

Phone Number Email Address



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Club Officer List

A single Person may not fill all officer positions. There must be more than one officer listed. All officers must include an email. The Secretary will be listed as our Corresponding Officer on file unless otherwise noted. The Corresponding Officer will receive all official communication from UKC.

PRESIDENT

Name _____
Address _____
City, State/Province and Zip _____
Phone Number _____
Email _____

VICE-PRESIDENT

Name _____
Address _____
City, State/Province and Zip _____
Phone Number _____
Email _____

SECRETARY

Name _____
Address _____
City, State/Province and Zip _____
Phone Number _____
Email _____

TREASURER

Name _____
Address _____
City, State/Province and Zip _____
Phone Number _____
Email _____