



**VIZSLA CLUB
OF
METRO ATLANTA**

Membership Application

Candidate Information (please print or type)

Name				
Kennel Name (if any)				
Address				
City	State	ZIP Code		
Telephone (home)	Telephone (cell)			
E-Mail				
E-Mail 2				

What activities are you interested in?

Companionship
 Vizsla Fun Days
 Agility
 Obedience
 Conformation
 Rescue
 Hunt Tests
 Hunting
 Field Trials
 Breeding

Please list any dog clubs of which you are an active member, including any offices you now hold and how long you have been a member:

Are you, or have you been, a member of the Vizsla Club of America (VCA)? Yes No

I/we agree to abide by the constitution and code of ethics of the Vizsla Club of Metro Atlanta (VCMA), the Vizsla Club of America (VCA), and the American Kennel Club (AKC).

Signed _____ Date _____
 Signed _____ Date _____
 Sponsor #1 _____ Date _____
 Sponsor #2 _____ Date _____

Membership Fees (check applicable boxes)

<input type="checkbox"/>	Single Membership (GA residents only) (1 vote)	\$15.00
<input type="checkbox"/>	Family Membership (GA residents only) (2 votes)	\$20.00
<input type="checkbox"/>	Associate Membership (out-of-state or GA resident) (no vote)	\$10.00
<input type="checkbox"/>	Optional donation for the VCMA Rescue Fund	\$
<input type="checkbox"/>	Total	\$

Make Checks Payable to: **Vizsla Club of Metro Atlanta**

Mail completed application and check to Membership Chairperson:

**Kaemmerle Deckert
4562 Kings Crossing Dr.
Kennesaw, GA 30144**