Cavaliers of Southern New England
Membership Application

Name:_____

Address:_____

City:_____ State:_____ Zip:_____

Home Phone: ( ) _____Work: ( ) _____Cell: ( )_____

Email Address:_____

Junior Applicant Date of Birth:_____

For Second Member Applicant of Two-Adult Household

Name:_____

Address:_____

City:_____ State:_____ Zip:_____

Home Phone: ( ) _____Work: ( ) _____Cell: ( )_____

Email Address:_____

Background in Dogs

Do you own a Cavalier? Yes ☐ No ☐ If yes, how many?_____

Average number of dogs you keep? _____ Are you currently breeding? Yes ☐ No ☐

Litters bred in the last year: _____ Specify breeds of litters you breed:_____

Kennel Name, if you have one:_____

What activities do you participate in, or would like to become involved in with your Cavalier(s):

Conformation ☐ Obedience ☐ Rally ☐ Agility ☐ Tracking ☐ Trick Dog ☐

Coursing Ability Test (CAT) ☐ Fast CAT ☐ Barn Hunt ☐ Scent Work ☐

Therapy Dog ☐ Canine Good Citizen (CGC) ☐ Cavalier Meetups ☐

When did you first exhibit/compete (if applicable) ?_____

Have you ever been suspended from the privileges of the AKC? Yes ☐ No ☐

If “yes”, state date and circumstances:

Please list all AKC Recognized Kennel Clubs, Performance or Specialty Clubs to which you belong and indicate dates of membership, any positions held and term of each:

Occupation & Professional Background:_____

Volunteerism

Our club is a working club. We expect our members to participate actively in the Club by volunteering their time annually.
Please describe any past experiences and/or current skills that might be relevant in that regard.
Please describe any academic, professional or personal achievements, experience, skills, or training that would be helpful in developing programs/seminars, coordinating meetings, publicity, public relations, writing, graphics or art.

Please check the applications in which you have proficiency

MS Word ☐ MS Excel ☐ MS PowerPoint ☐ QuickBooks ☐ Zoom ☐

Adobe Acrobat ☐ Adobe Photoshop ☐ Adobe Illustrator ☐ Adobe InDesign ☐

Please check those events for which you'd be interested in volunteering or taking a committee position:

Awards Night ☐ Health Clinic ☐ Summer Picnic ☐ Performance Trial ☐ Fall Match ☐

Specialty ☐ Holiday Party ☐

Please check at least 3 volunteer opportunities you might be willing to pursue on the checklist provided. We encourage a 4 hour minimum commitment per member annually.

☐ Review Premium/Catalog Content ☐ Publicity ☐ Social Media

☐ Match entries ☐ Match Setup ☐ Schedule Volunteers

☐ Judge Hospitality ☐ Health Clinic on-site volunteer ☐ Event Refreshments

☐ Specialty Venue Setup ☐ Venue Breakdown ☐ Event Decorations

☐ Specialty Hospitality Table ☐ Trophies, Ribbons and Prizes ☐ Dinner Coordination

☐ Auction & Raffle Coordination ☐ Performance Trial Steward

☐ Breeder Referral Coordinator (Referral contact person and responsible for "Current Puppy Availability" List)

☐ CSNE Cake for Specialty- Order and Pick/up ☐ Other_____

Attendance and Sponsorship
List two CSNE Meetings attended by Applicant *(required)*

1._____ Date:_____

2._____ Date:_____

This application is accepted subject to a 2/3 vote of approval of those members present at a regular club meeting of the Cavalier King Charles Spaniel Club of Southern New England.

In signing, the applicant acknowledges having read and understood the CSNE Ethical Guidelines, and agrees to abide by the By-Laws of the Cavalier King Charles Spaniel Club of Southern New England and Rules of the American Kennel Club, acting always in the best interests of the Club and purebred dogs.

I hereby understand and agree to the above statement:

Signature of Applicant _____Date:_____

Signature of Junior Applicant's Parent_____ Date:_____

(Signature of 2 Club-member sponsors required)

Signature of Sponsor #1 _____Date_____

*Printed Name of Sponsor #1*_____

Signature of Sponsor #2 _____Date_____

*Printed Name of Sponsor #2*_____

Annual dues are $25 per person/ $40 per 2-adult household. There shall be no membership dues for Junior Members. Annual dues for current year must be sent separately to the club treasurer at the time of applying. Dues paid with applications submitted after October 1 will cover the current and the following calendar year. All fees payable in US currency only to:
Cavalier King Charles Spaniel Club of Southern New England.

Upon approval for membership, applicant shall be notified in writing by the Secretary.

Mail the application fee/Dues to the CSNE Club Treasurer at the address listed on the CSNE website. Mail this completed application to the current Membership Chair at the address listed on the CSNE website.
If you have any questions, please contact the membership chair listed on the CSNE website

Approved_____ Date_____

Cavalier King Charles Spaniel Club of Southern New England