



Blackhawk Retriever Club of LaCrosse, WI

NEW OR RENEWING MEMBERSHIP APPLICATION

Name: _____

Spouse: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ (Home) _____ (Cell) _____

E-Mail: _____

CLUB DUES (Payable to Blackhawk Retriever Club)

- \$30 Per Household (Working Member)
- \$330 Per Non-working Member
 - **WORKING MEMBERS** commit to work a minimum of three (3) full days or six (6) half days at BRC Field Trials and/or Hunting Test

I wish to apply for membership as a: Working Household
(Please check one) Non-Working Member

The two current BRC Members who are recommending me/us for membership:

Current Member Signature

Current Member Signature

Members signing hereby acknowledge that they current and active members of BRC and recommend the above applicant(s) for membership.

As a condition of membership in the Blackhawk Retriever Club, Inc., I do hereby waive my right and the right of my heirs and assigns to hold BRC, its directors, officers or employees liable or responsible in any way for damage, injury or death that may occur to myself, my family or any property or belonging owned by myself or my family, including any dog(s). In addition, I agree to defend, indemnify and hold harmless BRC against any and all loss, liability, damages and costs (including attorney fees) arising from or related to my participation, or the participation of any dog in which I have ownership or which I am handling at any BRC event or activity. I understand the risks involved, including without limitation, dogs being off-leash and the discharge of firearms, and I will use utmost caution and safe conduct while participating in or attending any BRC event or activity. I agree to abide by the Club's Constitution and By-Laws, all BRC policies, and all Rules, Regulations and Standards of the American Kennel Club, Inc.

Signature: _____ Date: _____

Please give to a board member when completed or email completed application to
info@blackhawkretrieverclub.org