# Irish Wolfhound Association of the West Coast

## **APPLICATION FOR MEMBERSHIP**

### Which member class are you applying for?

Individual: \$30.00	Household:	\$35.00	Associate \$25.00
One voting member			Non-Voting member(s)
Named Below (Voting Memberships require spo	Both Named Below	I	Publications only
(voting interniberships require spe	orisors, see below)		
Name(s)			Date
Home Address			
State Zip			
Home Phone		l Phone 1	
Cell Phone 2			
Email 1	Ema	ail 2	
(Email required if you approve electronic communication)			
Why do you want to be a Mamber of IWAN	NC2		
Why do you want to be a Member of IWAV	VC?		
Associate applicants may stop here, s	sign form on rev	erse and subm	it with dues.
Individual and Household application			
good standing. Complete the balance o			
good standing. Complete the balance of	п ине аррпсаион	1.	
Occupation and Business			
Business Address			City
State Zip Phone		Fa	x
Email			
Number of IWs owned How lon	a associated wit	h brood?	
Reason for choice of breed	ig associated with	ii bieeu :	
Treason for choice of breed			
Are any of your IWs AKC registered?	Yes	No	
Have you owned IWs in the past?	Yes	No	
Are you interested in:			
Lure-coursing IWs?	Yes	No	
Open-field coursing?	Yes	No	
Showing in obedience?	Yes	No	
Showing in conformation/rally?	Yes	No	
Showing in other performance events?	Yes	No	
What is your future interest in the breed?			
Do you presently own any other breeds?	Yes	No	
If yes, which breeds?	162	INU	

Describe past associations with other breed of	r all-breed dog cl	ubs		
<ul> <li>Applicants for Individual and Househol sponsors before submitting application. Spoi IWAWC, in good standing, and must live in t</li> <li>Sponsors: write your comments regarding</li> </ul>	nsors must be cu wo different hous	ırrent Individua seholds.	al or House	-
SPONSOR #1 (print name)				
Do you personally know the applicant?  Comments:	Yes	No		
Signature				
SPONSOR #2 (print name)				
Do you personally know the applicant?  Comments:	Yes			
Signature				
I (we), the applicant(s), do hereby agree to ab and regulations of the American Kennel Club.	ide by the By-La	ws and Code	of Ethics o	f the IWAWC, and the rule
I (we) am in good standing with the American	Kennel Club	Yes	No	
Signature of Applicant:				Date:
Signature of Applicant:				Date:
Submit the completed application form with yo	our dues (Associa	ate = \$25, Indi	vidual = \$3	30, Household = \$35) to:
IWAWC Membership, c/o Peter Brown, 14787 Email: info@iwawc.com	Bonita Vista Way	/, Jamul, CA 9	1935	
Please make checks payable to IWAWC				
N				

Your application will be forwarded to the Board. New ASSOCIATE members will be considered accepted 10 days after receipt of application and payment. VOTING member applications (Individual or Household) are reviewed at the next scheduled meeting of the Board of Directors. The Membership Chairman will add you to the mailing list when your application is approved.

Additional copies of this application are available from: Secretary: Pat Cobb, 2397 N. Altadena Dr., Altadena, CA 91001, (626) 797-7620, patcobb@earthlink.net or online at: IWAWC.COM

## IRISH WOLFHOUND ASSOCIATION OF THE WEST COAST, INC. MEMBER CONSENT TO THE RECEIPT OF ASSOCIATION COMMUNICATIONS AND VOTING BY ELECTRONIC MEANS

Many IWAWC members now consent to receive official IWAWC communications by email. In order to be in compliance with California Law, IWAWC must have a hard copy written consent from each member in IWAWC's file. If IWAWC does not have Consent in its file, it will be required to communicate by US Mail, at significantly increased cost, and longer delivery time. The IWAWC Board has authorized distribution of this consent form to all members. Please respond ONLY IF YOU HAVE NOT SENT A PREVIOUS CONSENT FORM. Our goal is to have a form for each member, giving consent, or withholding consent. Two persons in a Household membership may sign on the same form. Each member of a Household must complete and sign for both to be included.

By signing the Consent form, you agree that IWAWC may send official notifications to you to the electronic address (email) you indicate below, and that any election may be conducted by electronic means (Example: Survey Monkey), using the same electronic contact you have given us (i.e., your email address). Your consent will remain valid for the duration of your membership and any renewals thereof. You may update your email address at any time. You may revoke your consent at any time by providing the IWAWC Secretary written notice stating that you revoke your consent.

To consent to electronic communication and voting please print your name and email address, sign your name and date the form. Return the signed and dated consent form to the IWAWC Secretary: Patricia Cobb, 2397 N. Altadena Dr., Altadena, CA 91001. You may also sign and date the form and scan it and email it to the Secretary at: patcobb@earthlink.net . There are two signature lines. Use only one for individual members and two for households.

#### To CONSENT, sign here:

I have read the foregoing. I CONSENT to receiving electronic communications from IWAWC and agree that elections may be conducted electronically. IWAWC should contact me at the email set forth below.

Print name:	Print name:	
Email:	Email:	
Signature:	Signature:	
Date:	Date:	
To WITHHOLD	**************************************	
tions may be conducted electronically.		
Print name:	Print name:	
Email:	Email:	
Signature:	Signature:	
Date:	Date:	