



APPLICATION FOR CLUB RECOGNITION

Instructions:

- ➔ Form to be typed or printed in ink
- ➔ All signatures to be written in ink and not printed
- ➔ Attach additional paper if required
- ➔ Return completed application and supporting documentation to The Canadian Kennel Club, Club Relations, Shows & Trials Division, or by email to clubrelations@ckc.ca

APPLICATION DETAILS

1. Proposed Name of Club: _____
2. Date Club was formed: _____
3. Define the Club Category:

Local
Provincial
Regional
National
4. Define the Club Type:

All-Breed	Field Trial
Performance	Non-Event
Specialty Breed	Obedience
Specialty Group	Junior Club
5. Objectives of Club: _____

6. Club's Area of Operation - Regional, Provincial and Local Clubs, please be specific and provide a map:

7. Is there another Club operating in the same geographical area? YES NO
 If 'YES', what is/are the name(s) of the other Club(s)? _____
8. Is this Club a branch of a 'parent' Club? YES NO
 If 'YES', what is the name of the 'parent' Club? _____
9. If you have previously applied for recognition, please provide the date you last applied: _____
10. The following supporting documentation must accompany this application:
 - A complete list of names, membership numbers and addresses of the members of the Club
 - If this is a Specialty Club, please provide a list of the breeds and registration numbers of the dogs owned by each member
 - A current copy of the Constitution and/or By-Laws of the Club
 - Copies of the Minutes of meetings for one (1) year preceding this application
 - If this is for a branch of a 'parent' Club, a letter from the 'parent' or National Club acknowledging this application
 - Details of activities and community involvement for the year preceding this application
 - Copy of a map with defined area of operation (not required for National Club applications)
 - The required fee as per the current Fee Schedule
 - If paying by credit card, the completed Credit Card Authorization Form (CVV Code will be required separately)

PAYMENT INFORMATION: PLEASE COMPLETE AND SUBMIT SEPARATE PAYMENT AUTHORIZATION FORM

CLUB OFFICERS

Please Note: The President and Vice-President together with one of the Secretary or Treasurer must be CKC Members in good standing.

PRESIDENT

Name _____ CKC Membership Number _____

Mailing Address _____

City _____ Province _____ Postal Code _____ Telephone Number _____

Email Address _____ Cellular Number _____

VICE-PRESIDENT

Name _____ CKC Membership Number _____

Mailing Address _____

City _____ Province _____ Postal Code _____ Telephone Number _____

Email Address _____ Cellular Number _____

SECRETARY

Name _____ CKC Membership Number _____

Mailing Address _____

City _____ Province _____ Postal Code _____ Telephone Number _____

Email Address _____ Cellular Number _____

TREASURER

Name _____ CKC Membership Number _____

Mailing Address _____

City _____ Province _____ Postal Code _____ Telephone Number _____

Email Address _____ Cellular Number _____

CLUB DIRECTORS

National Clubs are required to have a Board of Directors consisting of the officers of the Club and a minimum of four (4) regional directors. Officers and directors must be distributed across the Country. Provided there are always members of the Board of Directors residing in at least three (3) regions, the directors of the Club may be elected by the members residing in the region which the director resides or at the National level. For the purposes of this provision, the three (3) regions are:

1. All zones west of Ontario plus Yukon, NWT and Nunavut
2. Ontario
3. All zones east of Ontario

Regional and Provincial Clubs are required to have a Board of Directors consisting of the officers of the Club plus one director representing each of the Provinces or CKC electoral zones within that region or Province. In all cases, a minimum of two (2) directors are required.

Name	CKC Membership Number
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Mailing Address

City	Province	Postal Code	Telephone Number
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Email Address	Cellular Number
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Name	CKC Membership Number
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Mailing Address

City	Province	Postal Code	Telephone Number
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Email Address	Cellular Number
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Name	CKC Membership Number
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Mailing Address

City	Province	Postal Code	Telephone Number
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Email Address	Cellular Number
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Name	CKC Membership Number
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Mailing Address

City	Province	Postal Code	Telephone Number
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Email Address	Cellular Number
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Name	CKC Membership Number
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Mailing Address

City	Province	Postal Code	Telephone Number
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Email Address	Cellular Number
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CLUB DIRECTORS

Name

CKC Membership Number

Mailing Address

City

Province

Postal Code

Telephone Number

Email Address

Cellular Number

Name

CKC Membership Number

Mailing Address

City

Province

Postal Code

Telephone Number

Email Address

Cellular Number

DECLARATION

We, the undersigned, agree to be bound to the policies and procedures attached hereto. We also understand that there is no obligation on the part of The Canadian Kennel Club to approve this application, and that if this application is rejected, we have no recourse against The CKC.

President's name (type or print)

Date

President's signature

Secretary's name (type or print)

Date

Secretary's signature

Date Received

Reference Number

Date Approved

Approved by CKC