VIRGINIA RETRIEVER BENEFIT

APPLICATION FOR INDIVIDUAL, CLUB or PROFESSIONAL MEMBERSHIP

Application for (please check one box in each line):

Membership through current year

____ Individual ____ Club ____ Professional

Personal information: (Please print)

First Name **Last Name** Name of Member spouse if this is a Spouse application

Mailing Address (Street & Street # or P.O. Box Number) Name of Business (Professional Trainer's only)

City **State** **Zip** **E-mail (PLEASE PRINT)**

Home Phone Cell Phone Website

Signature **Date**

Applicant must be a member in good standing of a Member Club of the Virginia Retriever Benefit.
Please list your retriever club(s) below:

Club name: _____

Please circle dues of desired membership category and time period (see Role and Rules for full details).

Starting date between: / Category of membership:	Jan. 1 – June 30, 2009 (runs through end of year)	July 1 – Sept. 30, 2009 (runs through end of year)	Oct 1 – Dec. 31, 2009 (runs through end of year)
Individual Member *	$100.00	$75.00	$50.00
Member Club	$200.00	$175.00	$150.00
Professional Member *	$200.00	$175.00	$150.00

** Spouse Members have all the rights and benefits of their Member category*

Please send: **Your or club check payable to VRB and** * This form * Signed copy of VRB Hold Harmless Agreement * If a club, a list of membership and club officers	Mail to: **Mr. Mike Griffith** **Virginia Retriever Benefit** **8512 Eastfair Ct.** **Chesterfield, VA 23838** **Phone: (804) 339-1141** **E-mail: n1xamwg@aol.com**