## CSSA FANCIERS Inc

## Operating as CANADIAN SHETLAND SHEEPDOG ASSOCIATION

**Application for Membership**

**Name: (*please print*) Phone #: Email:**

**Address:**

**CKC Number: Tattoo Combination:**

**Kennel Prefix: Website:**

**How many years active/involved in:**

**Breeding: Exhibiting: Conformation: Performance: Other:**

**Please indicate type of Membership applying for. Fee is $20 unless indicated otherwise.**

|  |  |
| --- | --- |
| * **Regular**
 | * **Junior - Free (include age)**
 |
| * **Household (include name/signature of partner)**
 | * **Foreign ($20 payable in US funds)**
 |
| * **Club Affiliate**
 |  |

# DECLARATION

As a result of the Privacy legislation in Canada, the CSSA must have written consent of all our members to have personal information of the members such as names, addresses, e-mail addresses and telephone numbers. This written consent allows for your personal information to be shared among the various members who need this information for Club business, such as voting lists and Newsletter mailings. The membership list is for the use of members and is never to be shared with or sold to other individuals or organizations. I hereby give permission for my name, address, e-mail address and telephone number to be collected and used as described above and agree to abide by the regulations and/or guidelines set forth in the Constitution and By-Laws of the Canadian Shetland Sheepdog Association.

By completing the information below and by signing this application, I hereby give permission for my name, address, email address and telephone number to be collected and used as described above. I further agree to abide by the regulations/guidelines as set forth in the By-laws of the CSSA Fanciers Inc. and agree to abide by the Code of Ethics.

**Signature: Date:\_\_\_\_\_\_**

**SPONSORSHIP**

This application must be accompanied by Sponsorship of two Regular CSSA members in good standing. The Applicant must have been personally acquainted with the Sponsors for a period of at least 12 months.

As a Sponsor for the above named, I acknowledge that I am a CSSA member in good standing with the CSSA and have personally known the Applicant for at least one year. Email approval of sponsorship will be accepted in lieu of signature on the form.

1st Sponsor’s Name: CSSA #:

Signature:

2nd Sponsor’s Name: CSSA #:

Signature:

**Email form to:** Evelyn Susin at crinan@rogers.com **AND** **e-transfer fees to**: cssatreasurer1@gmail.com

**If you cannot etransfer, make the cheque/money order**

OFFICE USE ONLY

***payable to CSSA* and mail to**:

CSSA Treasurer

Joanne Howe

85 Wolf Lane

Victoria, BC V9A 7M2