

Annual dues are due on or before December 31, 2016 for the period **January 1, 2017 to December 31, 2017**
Dues must be paid to be a member in good standing with voting privileges.

ALL MEMBERS

- _____ \$35.00 Single Membership (\$45.00 for Foreign Memberships)
- _____ \$40.00 Household Membership (2 adults at same address) (\$50.00 for Foreign Memberships)
- _____ \$12.00 Junior Membership (up to 17 years old)
- _____ \$15.00 Associate Membership

*******PAYMENT IN U.S. CURRENCY ONLY WILL BE ACCEPTED*******
DUES POSTMARKED AFTER MARCH 1, 2017 REQUIRE A LATE FEE CHARGE OF \$10.00

ALL members please complete the following in full and sign. (Includes Life Members)

PRINT NAME (S) _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

AREA CODE/TELEPHONE# _____

CELL PHONE (S) _____

EMAIL ADDRESS (S) _____

KENNEL NAME (IF ANY) _____ WEB SITE _____

My signature below represents that I agree to the Code of Ethics, that I understand that my acceptance of this Code of Ethics, and signature, subjects me to the provisions and procedures as stated. My signature also represents that I have read and support the Guidelines for Breeders and Owners of Clumber Spaniels.

SIGNATURE(S) _____

DATE _____

Make checks payable to: Clumber Spaniel Club of America, Inc.
Return completed dues notice along with your check to the Membership Secretary
Vonda R. Poole, CSCA Membership Secretary
874 Orchard Terrace Drive
New Wilmington, PA 16142-4222

IF YOU WOULD LIKE TO SERVE THE CSCA, PLEASE NOTE YOUR AREA(S) OF INTEREST HERE:

PRIVACY NOTICE

The Clumber Spaniel Club of America (CSCA) respects your privacy. Any and all personal information collected by the club concerning its members will be kept strictly confidential. Your personal information will never be sold and will not be disclosed to unaffiliated third parties without your permission. Your personal information will be shared in the CSCA membership directory, the CSCA Bulletin, and via any other forms of communication within the CSCA that are allowed by its Constitution and Bylaws. Your personal information will be shared with the Clumber Spaniel Health Foundation (CSHF) and the Clumber Spaniel Rescue Charitable Trust (CSRCT) unless you specifically choose to opt out. If you do so choose, please indicate below by placing a check mark beside the applicable statement(s):

Do not share my information with the CSHF: _____ Do not share my information with the CSRCT: _____

Signature(s) _____

Date _____

Optional Additional Donations
I include a separate check made payable to the organization(s) of my choice

I wish to make a tax-deductible donation to the Clumber Spaniel Rescue Charitable Trust in the amount of \$ _____

I wish to make a tax-deductible donation to the Clumber Spaniel Health Foundation in the amount of \$ _____

I wish to donate an amount of \$ _____ to CSCA in addition to the amount of my dues.

I WISH TO RECEIVE THE PAPER COPY OF THE CLUMBER CHRONICLE MAILED TO ME. YES _____ ONLINE ONLY _____