

Mid-South Boykin Spaniel Retriever Club
Membership Application
(please print)

Name: _____

Spouse: _____ Children: _____

Address: _____ City: _____

State: _____ Zip: _____

Home No.: (_____) _____ Work No.: (_____) _____

E-mail: _____ Web Site: _____

Dog(s) Name	DOB	BSR#	OFA#	CERF Rating	Titles
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

Membership Dues: \$35.00 per year due on or before June 30 payable to MSBSRC.
Membership runs from June 1 to May 31.

Amount Enclosed: _____ New Member: ____ Renewal: ____

Date of Application: _____

Applicant's
Signature: _____

Return form with payment to:

Mid-South Boykin Spaniel Retriever Club
Amelia Skipper, Treasurer
94 Sunrise Dr.
Eufaula, Al 36027