



National Independent Rottweiler Klub (NIRK)

Application for Membership



<input type="checkbox"/> New Membership <input type="checkbox"/> Renewal	<input type="checkbox"/> Single Membership <input type="checkbox"/> Family Membership (2 people living at same residence)
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Member Information:

Name:		Second Name: (if applying for Family Membership)		
Address:		City:	State:	Zip:
Phone:	Fax:	E-Mail:		

Other Affiliations:

Please list all other dog affiliations. (Clubs, local or foreign, Organizations, etc.)

Membership Dues:

Please include a check or money order, made payable to the National Independent Rottweiler Klub (NIRK), with your application. Membership is annual and is due January 1st to keep membership in good standing.

<input type="checkbox"/> Single Membership \$50.00
<input type="checkbox"/> Family Membership (2 people living at same residence) \$75.00
After August 1st:
<input type="checkbox"/> Single Membership \$25.00
<input type="checkbox"/> Family Membership (2 people living at same residence) \$37.50

NIRK Membership Agreement. This is a legal binding contract. Please read carefully.

I agree to follow the terms of the National Independent Rottweiler Klub Code of Ethics, including only breeding dogs with passing hip clearances by the OFA or an FCI recognized authority. I have read and agree to the NIRK ByLaws. I understand that violating the terms of the NIRK Code of Ethics may result in the suspension of my NIRK membership and privileges.

Upon acceptance of my membership application and/or event entries, I agree to release the NIRK, its officers, members, employees, and agents from and against any and all liability arising from any activities and/or events held by the NIRK, even though that liability may be due to the inadvertence on the NIRK's part or any person acting on the NIRK's behalf. I understand that activities involving dogs hold an increased risk for personal injuries and property damages, therefore, I agree to assume all damages, risks, and other negative outcomes to my person or property that may occur due to my participation in the NIRK activities and/or events.

I agree to the NIRK membership Regulations and accept them as a condition of becoming a member of the NIRK.

Signature & Date	Signature & Date
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<p><i>Mail Application and Fee to:</i></p> <p>NIRK Membership 13460 Aurora Drive San Leandro, CA 94577</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="4" style="text-align: left; padding: 2px;">NIRK OFFICE USE ONLY</th> </tr> <tr> <th style="width: 25%; padding: 2px;">RCVD</th> <th style="width: 25%; padding: 2px;">APPROVAL</th> <th style="width: 25%; padding: 2px;">ISSUED</th> <th style="width: 25%; padding: 2px;">MEMBER #</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	NIRK OFFICE USE ONLY				RCVD	APPROVAL	ISSUED	MEMBER #				
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