## FRONT RANGE AGILITY TEAM Membership Application



Name(s):					
Address:					
City:			State:	Zip:	
Phone:	E	E-Mail Address: _			
Agility Dogs (name and	d breed):				
Membership Type:	Individual			Junior	
Individual: 1st year du Family: 1st year dues s receives 2 votes in any Associate: Annual dues Junior: Annual dues \$1 Automatically convert	\$36, renewals club matter. \$10, non-vot	\$25. Two or moing membership, membership, red	receives club ceives club nev	wsletter. Open to those	nailings.
I (We) hereby apply for the by-laws of the Fron minimum of two trial of	nt Range Agilit	y Team. I (We)	understand th		, • ,
Signed:				Date:	
Sponsor:			Sponsor:		

## Checks should be made payable to FRAT.

Please mail completed form together with appropriate dues to:

Suzy Hiskey, FRAT VP 8073 W. Polk Pl. Littleton, CO 80123