

TIMBER RIDGE	Name(s): Address: City:	Renewal Application	State:	Zip:
	Email: Receive Newsletter by email (Microsoft Word) or Postal Service			
Type of membership:	Fami	ridual (\$20 per year) ly (\$30 per year) or – ages 8-18 (\$10 per ye	ar)	
	M/F	Registered Name		Call Name
How would you like to pro				
Provide hospitality at a Help organize a mall de Plan programs for meet Serve as a board memb	meeting emo ings	Teach an obedience of Help out at a match of Help with the newsle Organize a tracking s	class or trial tter	_ Help teach an obedience class _ Help organize a fun match _ Host a judge for a trial _ Other
Complete the renewal app	olication and ma	il with membership fee to):	
TRDTC c/o Ann Hanson 1423 Frontenac Ave Stevens Point, WI 54481	I			
Please make checks paya January 31st.	ble to TRDTC.	Renewal Membership a	pplication and d	ues need to be received by

Club Use Only Check # _____ Type of Membership _____ Date Paid _____