

# Musical Dog Sport Association

## Application for Membership

Annual Dues: \$25.00

Please make checks payable to MDSA

Send to: MDSA

9211 West Rd #143-104

Houston, TX 77064

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Occupation: \_\_\_\_\_

What dog breed(s) do you currently own? \_\_\_\_\_

What dog related activities have you participated in? \_\_\_\_\_

Have you shown and/or earned titles with your dog(s)?

Please

list: \_\_\_\_\_

What other dog related clubs do you belong to? \_\_\_\_\_

What are your areas of interest in Canine Freestyle?

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

demonstrations

competitions

community service (hospital/nursing home/school visits)

other explain: \_\_\_\_\_

Please list below any areas of expertise that would be helpful to MDSA i.e., computer skills, artistic, writing skills, fund raising, hospitality, etc.:

What are your expectations of MDSA? \_\_\_\_\_

What do you hope to contribute to MDSA? \_\_\_\_\_

I certify that the information supplied in this application is complete and correct. I agree to abide by the Constitution and Bylaws, the rules and regulations of the Musical Dog Sport Association.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date Received: \_\_\_\_\_

Date Approved: \_\_\_\_\_