



# MASTER NATIONAL RETRIEVER CLUB

## Club Membership Application

Mail to: Jimmy Hughes, Treasurer, P.O. Box 444, Columbia, TN 38402-0444 w/ \$50 Membership  
Fee payable to Master National Retriever Club

The \_\_\_\_\_  
Club Name

wishes to apply for membership with the Master National Retriever Club. The following  
individuals are hereby designated as Contact and Delegate until further notice.

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

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

By: \_\_\_\_\_

Club President

Attest: By: \_\_\_\_\_

Club Secretary

Date of Application: \_\_\_\_\_

**Note: Both Club President and Secretary must sign.**