



## MASTER NATIONAL RETRIEVER CLUB New New Club Membership Application

Please complete the form below and Email to:

**MN Treasurer, Paul Brady at  
pbradymnrc@gmail.com**

If/when board approved, the club will receive notification on how to proceed with electronic dues payment.

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

Please fill in the Club Delegate and Contact information. The following person is hereby appointed Delegate until further notice.

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

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

Zip: \_\_\_\_\_

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

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

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

Zip: \_\_\_\_\_

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

By: \_\_\_\_\_ Club President

Attest: By: \_\_\_\_\_ Club  
Secretary

Date: \_\_\_\_\_ Note: Both Club President and Secretary must sign