



CANADIAN NATIONAL MASTER RETRIEVER CLUB

MEMBERSHIP APPLICATION FORM

CLUB NAME: _____

PRESIDENT: _____
ADDRESS: _____

PHONE NUMBER: _____ EMAIL: _____

CLUB SECRETARY: _____
ADDRESS: _____

PHONE NUMBER: _____ EMAIL: _____

HUNT TEST DATE: _____
STAKES: _____
SECRETARY: _____
PHONE NUMBER: _____ EMAIL: _____

HUNT TEST DATE: _____
STAKES: _____
SECRETARY: _____
PHONE NUMBER: _____ EMAIL: _____

HUNT TEST DATE: _____
STAKES: _____
SECRETARY: _____
PHONE NUMBER: _____ EMAIL: _____

Please complete this form, attach a \$50.00 cheque payable to the Canadian National Master Retriever Club and mail to:

Canadian National Master Retriever Club
C/O Fred Benjaminson
64 Voyageur Avenue
Winnipeg MB R2Y 0H8

Visit the Canadian National Master Retriever Club's website at www.canadianmasternational.ca