



MID OHIO OWNER HANDLER ASSOCIATION, INC. APPLICATION FOR MEMBERSHIP

NAME _____

ADDRESS _____

PHONE _____ EMAIL ADDRESS _____

QUESTIONS

Have you handled a dog that has completed a title? _____ If yes, state registered name, breed and title.

Do you handle your own dogs? If so, for how many years? _____

What are your present breeds? _____

Do you breed dogs? _____ If yes, list the breeds and how many years you have bred.

List any present and prior memberships in dog clubs and any offices held.

Why do you wish to belong to this Association? _____

What special skills do you have to share with OHA? _____

Have you ever been suspended from privileges of **American Kennel Club**? _____ If yes, state date and circumstances on a separate page.

How did you learn about OHA? _____

Fiscal year begins November 1st of each year. Members accepted after July 1st will be considered paid to the end of the following year (October 31st). **Membership Dues:** \$20.00 per person, \$30.00 per couple, \$10.00 for a junior member, \$6.00 per junior if either parent is a member. This application may be accepted subject to the approval of the Board of Governors of The Owner Handler Association of America, Inc. If not approved, there is no obligation on the part of the Association to disclose the reasons for its decision.

I hereby understand and agree to the above statement.

X _____ Date _____ Amount Enclosed \$ _____

Applicant Signature

[A check is to accompany the application and made out to: **Mid-Ohio Chapter, Inc. Owner Handler**]

Sponsor Name _____ Sponsor Signature _____

RETURN TO: Cindy Bean 5058 Highland Meadows Drive, Hilliard, OH 43026, or to any Board Member or Club Officer.

Office use only: Date Received: _____ Receiver: _____