

**Verein Deutsch-Drahthaar/Group North America Membership Application: Calendar Year: 20\_\_**

New Member Application      Request for Reinstatement after Lapse in Membership      Transfer from other VDD

Group: \_\_\_\_\_ Social Membership: Primary Membership is with VDD Group:

\_\_\_\_\_ Where did you first learn about VDD/GNA?      GNA member      website      Magazine

advertisement Where did you obtain your information and application?      Breeder      National Representative      GNA  
website

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

\*Home telephone: \_\_\_\_\_

(first, middle initial, last)

Salutation: \_\_\_\_\_ (Mr., Dr., Mrs., Ms. Miss)

\*and/or Mobile telephone: \_\_\_\_\_

Informal first name: \_\_\_\_\_

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

(nickname)

\*Street address: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_

\*Mailing Address: \_\_\_\_\_

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

(if different)

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

Spouse's Name: \_\_\_\_\_

\*State: \_\_\_\_\_ \*ZIP: \_\_\_\_\_

Chapter preference: \_\_\_\_\_  
(or you will be assigned in your geographic area)

\*Country: \_\_\_\_\_ (if other than USA)

\*Important - your application cannot be processed without this information. Incomplete applications will be returned.

Please list all VDD registered Deutsch-Drahthaar and/or other FCI recognized dogs below:

Use an additional sheet of paper for additional dogs.

Registration #:	Registered Name:	Breed (DD, DK, etc.):	Whelp Date:
_____	_____	_____	_____
_____	_____	_____	_____

All membership fees include \$30 for a subscription to the VDD/GNA newsletter.

\_\_\_ \$125.00 - New Member Dues and Initiation Fee enclosed

\_\_\_ \$30.00 Social Member Dues enclosed (only for those who are already regular members of another VDD Group - specify above)

\_\_\_ \$62.50 (Only applicable to new members under 25 years of age, without regular income, and living in the same family household where at least one parent is a VDD member. Please provide name of parent who is a current VDD member: \_\_\_\_\_)

Note: Dues are payable for calendar year.

Dues received on or after October 1 will be credited for the following year.

Licensed hunter \_\_\_ Yes \_\_\_ No      JGHV Association Judge \_\_\_ Yes \_\_\_ No

Please indicate the number dogs you are likely to enter in the following:

\_\_\_ VJP (spring puppy test)      \_\_\_ HZP (fall breed test)      \_\_\_ VGP (utility test)      \_\_\_ Breed Show

I hereby agree to comply with the Constitution and Bylaws of the Verein Deutsch-Drahthaar and VDD Group North America, and with the VDD Breeding Regulations. I further agree to notify VDD Group North America in writing prior to November 15 if I should not intend to renew my membership for the following year. I realize that failure to notify VDD/GNA by that date will obligate me to remit the annual membership dues for the following year.

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

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

**Mail check or money order made payable to VDD/GNA to:**

Faith M. Wood  
VDD/GNA Business Manager  
3654 East Martin Avenue  
Cudahy WI 53110