



Membership Form

Date _____ Are you a first time member? Yes No

Name _____

Address _____

E-mail _____

Home phone _____ Cell _____

Membership Level (check one):

_____ \$500 Life Membership _____ I am a DRC Life Member

_____ \$100 One Year Regular Membership

_____ \$40 One Year Working Membership (You agree to work at least one full day)

Check all areas where you are willing to work.

_____ Grounds preparation (mowing, weed whacking, etc.)

_____ Working the DRC Hunt Test August 5 - 7, 2011

_____ Working the DRC Field Trial August 19 - 21, 2011

Please return this form with your payment to: _____

*Duluth Retriever Club
P. O. Box 3074
Duluth MN, 55803-3074*