

Indiana Purebred Dog Alliance, Inc.

MEMBERSHIP APPLICATION (circle one) *Individual **Household ***Delegate ***Sponsor

(PLEASE PRINT)

DATE:		
NAME:		
ADDRESS:		
HOME PHONE:	CELL PHONE:	
WORK PHONE:	FAX:	
EMAIL		
CLUBS REPRESENTED:		
LEGISLATORS YOU KNOW PERSONALLY:		
ARE YOU WILLING TO SERVE ON A (COMMITTEE OR ON THE BOARD TO SUPPORT IPDA INITIA	TIVES?
	YES NO	-

BY SIGNING THIS APPLICATION, I/WE PROMISE TO UPHOLD THE BY-LAWS & CODE OF ETHICS OF THE INDIANA PUREBRED DOG ALLIANCE, INC.

PLEASE COMPLETE AND RETURN MEMBERSHIP APPLICATION WITH APPROPRIATE MEMBERSHIP FEE TO: IPDA, Laura Hooser, Treasurer, 8128 Woolsley Ct, West Lafayette, IN 47906

Payment option with Zelle to laura.hooser2@gmail.com