

WHITE SANDS AGILITY CLUB
WSAC
Las Cruces, NM
Individual \$15/ Family \$25
MEMBERSHIP APPLICATION

Date: _____

Name(s): _____

Address: _____

City, State, Zip: _____

Home Phone: _____ **Cell Phone:** _____

E-Mail: _____ Providing your email indicates you agree WSAC can use it for club notifications.

Breed of Dog(s): _____

Briefly state why you desire to join the club: _____

What agility venue(s) do you participate in: _____

What other dog club(s), if any, do you currently belong to or have you previously been a member of? _____

Briefly explain your experience with agility: _____

Mail Membership application and payment made out to "WSAC" to:
White Sands Agility Club, P.O. Box 615, Fairacres, NM 88033