

NORWICH TERRIER CLUB

O F A M E R I C A



MEMBERSHIP APPLICATION

Please use additional sheets if needed.

1. Personal Information

Name (First) _____ (MI) _____ Last) _____

Name (First) _____ (MI) _____ Last) _____

Address _____

City _____ State _____ Zip _____ Country _____

Phone _____ Phone 2 _____ Email _____

Occupation _____

2. Type of Membership:

- Individual Dual Junior (age 10-17 years)

3. Tell us why you would like to become an NTCA member.

4. How long have you been involved in the following activities with your Norwich Terrier?

Conformation _____ Agility _____ Obedience _____ Breeder _____

Other activities (please list)

5. How long have you been involved in the following activities with OTHER BREEDS?

Conformation _____ Agility _____ Obedience _____ Breeder _____

Other activities (please list)

6. Do you plan to participate in any of these activities with your Norwich if you have not previously done so?

YES NO

If yes, please describe.

Use the additional sheets if necessary to complete questions 7-9.

7. List the following information for all NORWICH you own, co-own, or that reside with you:
*NOTE You must own a Norwich that has resided with you continuously for at least 24 months to be eligible for membership.

Dog's Name (list full registered name)

AKC Registration# _____ DOB _____

Sex: Male Female) Neutered: Y N

Resides with you: Y N Co-owned: Y N

Co-owner(s) names(s)

Acquired/Purchased from?

8. List OTHER BREEDS and # of dogs that you currently own, co-own, or that reside with you:

9. List the following information for all LITTERS you have bred or co-bred in the past 3 years?

Breed _____

Sire's Name / CHIC# / tests _____

Dam's Name / CHIC# / tests _____

Litter Registration# _____ Date Whelped _____

Live Puppies in Litter ____ Co-breeder(s) name(s), if any _____

10. Please describe the facilities for housing your dogs.

11. Would you commit to take back or rehome a Norwich Terrier that you bred or sold if necessary later in the lifetime of the dog? Y N If no, please explain:

12. List dog clubs you currently belong to (if known, include a contact name, phone#, & email).

13. List offices you have held or committees on which you have served in other dog clubs. Please describe your participation.

14. Have you attended NTCA events (national specialty, regional specialty, other)?

Y N Please describe _____

25. Do you intend to follow the NTCA recommendations to do health testing before breeding?
<http://www.caninehealthinfo.org/brdreqs.html?breed=NT>

Y N N/A

Print Name (s)

Signature _____ Date _____

Signature _____ Date _____

NTCA Form 8-15-2016

ADDITIONAL NORWICH TERRIERS (continue Question 7, if needed)

Dog's Name (full registered name) _____

AKC Registration# _____ DOB _____

Sex: Male Female Neutered: Y N Resides with you: Y N

Co-owned: Y N Co-owner(s) names(s) _____

Acquired/Purchased from? _____

Dog's Name (full registered name) _____

AKC Registration# _____ DOB _____

Sex: Male Female Neutered: Y N Resides with you: Y N

Co-owned: Y N Co-owner(s) names(s) _____

Acquired/Purchased from? _____

Dog's Name (full registered name) _____

AKC Registration# _____ DOB _____

Sex: Male Female Neutered: Y N Resides with you: Y N

Co-owned: Y N Co-owner(s) names(s) _____

Acquired/Purchased from? _____

Dog's Name (full registered name) _____

AKC Registration# _____ DOB _____

Sex: Male Female Neutered: Y N Resides with you: Y N

Co-owned: Y N Co-owner(s) names(s) _____

Acquired/Purchased from? _____

Dog's Name (full registered name) _____

AKC Registration# _____ DOB _____

Sex: Male Female Neutered: Y N Resides with you: Y N

Co-owned: Y N Co-owner(s) names(s) _____

Acquired/Purchased from? _____

ADDITIONAL LITTERS (continue Question 9, if needed)

List the following information for all LITTERS you have bred or co-bred in the past 5 years?

Breed _____
Sire's Name / OFA and other tests _____
Dam's Name / OFA and other tests _____
Litter Registration# _____ Date Whelped _____
Live Puppies in Litter _____
Co-breeder(s) name(s), if any _____

Breed _____
Sire's Name / OFA and other tests _____
Dam's Name / OFA and other tests _____
Litter Registration# _____ Date Whelped _____
Live Puppies in Litter _____
Co-breeder(s) name(s), if any _____

Breed _____
Sire's Name / OFA and other tests _____
Dam's Name / OFA and other tests _____
Litter Registration# _____ Date Whelped _____
Live Puppies in Litter _____
Co-breeder(s) name(s), if any _____

Breed _____
Sire's Name / OFA and other tests _____
Dam's Name / OFA and other tests _____
Litter Registration# _____ Date Whelped _____
Live Puppies in Litter _____
Co-breeder(s) name(s), if any _____

Breed _____
Sire's Name / OFA and other tests _____
Dam's Name / OFA and other tests _____
Litter Registration# _____ Date Whelped _____
Live Puppies in Litter _____
Co-breeder(s) name(s), if any _____