



Club Name: _____

City: _____ County: _____ State: _____

☐ Coonhound ☐ Beagle ☐ Cur/Feist ☐ Pointing Dog ☐ Shed Dog

Club Physical Address: _____

Directions to Club:

Please list all club members (attach separate sheet if necessary).

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Application To Become a UKC® Approved Club continued

CLUB OFFICER INFORMATION

PRESIDENT

Name _____

Address _____

City _____ State/Prov. _____ Postal Code _____

Phone _____ Email _____

VICE-PRESIDENT

Name _____

Address _____

City _____ State/Prov. _____ Postal Code _____

Phone _____ Email _____

SECRETARY

Name _____

Address _____

City _____ State/Prov. _____ Postal Code _____

Phone _____ Email _____

TREASURER

Name _____

Address _____

City _____ State/Prov. _____ Postal Code _____

Phone _____ Email _____

CORRESPONDING OFFICER

Name _____

Address _____

City _____ State/Prov. _____ Postal Code _____

Phone _____ Email _____

Please note that the Corresponding Officer is the person in your club who you want to receive any correspondence from UKC, such as event confirmations, invoices, etc.

Additional information you would like us to know about your club _____
