



**AMERICAN SIGHTHOUND FIELD ASSOCIATION
CLUB MEMBERSHIP UPDATE and DUES RENEWAL FORM**

*As required by the ASFA constitution and by-laws, and by current policy, each year each club associated with the ASFA is required to notify the ASFA of its current club officers, including addresses, and the name and address of the person who shall represent the club as its Club Delegate. This information and annual dues must be on file **on or before May 1st of each year.***

Club Name: _____ Initials (Max. 5) _____

ASFA/Club Delegate Name: _____

Address: _____

City/State/Zip: _____

Phone: () _____

E-mail: _____

This Delegate will: receive all ASFA correspondence, be listed in the club list appearing on the ASFA website, receive the Board Communiqués, and also keep the club informed. A club may change its Delegate at any time by submitting a change of delegate form to the ASFA Membership Committee.

We are: a Member Club an Affiliated Club applied for affiliation

In ASFA Region #: _____ The date of our last trial was: _____.

To complete this form, we have enclosed:

- a listing of club officers (title, name, address, phone number, and e-mail address) [on reverse side, or separate enclosure]
- \$75.00 renewal fee made payable to ASFA
- \$78.00 renewal fee made via PayPal at www.asfa.org/club/renewal_form

The signature below is an officer of the club and **NOT** the ASFA / Club Delegate or spouse of the Delegate.

Signature of officer

Office

Name of Officer (printed)

Date

Return this form and enclosures **on or before May 1st** to:

Vickie Jacobs
ASFA Membership Chair
7045 SE 61st St.
Tecumseh, KS 66542

This form will be returned if not completed in full.

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(This form will be returned if not completed in full.)

List of all club officers and their addresses:

President: _____
Address: _____
City, State, ZIP _____
Phone # (with area code): _____
E-Mail _____

Vice President: _____
Address: _____
City, State, ZIP _____
Phone # (with area code): _____
E-Mail _____

Corresponding Secretary: _____
Address: _____
City, State, ZIP _____
Phone # (with area code): _____
E-Mail _____

Recording Secretary: _____
Address: _____
City, State, ZIP _____
Phone # (with area code): _____
E-Mail _____

Treasurer: _____
Address: _____
City, State, ZIP _____
Phone # (with area code): _____
E-Mail _____

Although it is not a requirement, ASFA would appreciate receiving a copy of your club's current membership list. If available, please include it when you return this form.
ASFA may use these lists for ASFA promotional mailing. Yes No

Reminders...

- An applied club must renew its dues each year as do affiliate and member clubs.
- An Affiliate club must submit a completed Membership application, meet all current requirements, and have the ASFA Board of Directors vote to approve the request before Member status is granted.