



GLPWDC

Great Lakes Portuguese Water Dog Club

ASSOCIATE MEMBERSHIP

APPLICATION

(Non-Voting)

2025 2026

January 1
Dues are Due and
Payable on or before

January 31
Club Privileges are suspended
If dues are unpaid

March 1
Membership is terminated
if dues are unpaid

Step 1=Complete Information Below and on Page 2 and Page 3,
Step 2=Choose Pmt Method; **Step 3**=Enter your appropriate Dues Amount;
Step 4=If you choose to pay with PayPal; **Step 5**=Email Appl to Cathy & Stan.

Associate Membership (AM) is open to all persons 18 years of age and older. Associate Members will enjoy all the privileges of the GLPWDC except the right to vote and hold office and shall not count in the determination of a quorum. After one year from the date of being accepted as an Associate Member, the member may apply for Full Membership. However, Associate Members need not apply for Full Membership and may continue as Associate Members for an indefinite period of time. Full Membership includes Full Voting Rights.

Primary Member Name: _____ Cell: _____

Email: _____ If Jr. D.O.B. _____

Second Member Name (same address): _____ Cell: _____

Email: _____ If Jr. D.O.B. _____

Mailing Address:>> _____

City, State/Province, Zip/Postal Code or Country (if not U.S.):

>> _____

I agree to abide by the GLPWDC and the PWDCA Bylaws, Cert of Incorporation, and Code of Ethics, as well as AKC rules and regulations.

STEP 2=Choose your payment method >>: Check or **PayPal**

STEP 4= Check the Box for PayPal Type 1., 2., or 3. and then follow the instructions under the number that you selected.

STEP 3=Complete Dues Below:

MEMBERSHIP DUES

Membership in the GLPWDC is by Individual. Dues are discounted for second and subsequent members at the same address.

Membership Type	Enter Name	Cost	Enter Amt
Primary Adult Member:		\$40.00	
Secondary Adult Member: 2025		\$ 5.00	
2026		\$10.00	
Each Addl Adult Member: 2025		\$ 5.00	
2026		\$10.00	
Junior Member (with Adult Membership)		\$ 5.00	
Junior Member (w/o Adult Membership)		\$30.00	
Breeder Sponsored Membership		\$10.00	
PayPal Pmt Fee (add \$2.00 if using PayPal for Payment:)		\$ 2.00	

Payment by Check **Total Dues & PP Fee:>**
(In U.S. dollars payable to GLPWDC)

GLPWDC WEBSITE: www.glpwdc.com

QUESTIONS?

Contact: GLPWDC
Membership Chair:
Cathy McClellan

Ronda Ryan, President
[helloryan@gmail.com](mailto:hellorryan@gmail.com)

Stanley Liebaert, Treasurer

cathymcclellan@yahoo.com

steamer43@yahoo.com

FOR USE BY GLPWDC ONLY:

Date Received: _____

Amount Received: \$ _____

How Paid: _____

Thank You For Your Interest & Support of Our Club! Cathy McClellan, Membership Chair

Junior Membership (JM) is open to persons 10 – 17 years of age. Junior Members will enjoy all the privileges of the Club except the right to vote and to hold office and shall not count in the determination of a quorum. Upon reaching the age of 18, a Junior Member will automatically become an Associate Member and may apply for Full Membership if they have been in the Club for at least one year. (Please include your Date of Birth.)

GLPWDC (Breeder) Members in good standing may pay the Associate or Junior Membership for their new puppy owners for a \$10.00 fee per Household for the remainder of the Club year. At the time of annual dues renewal, these members may continue their membership by submitting the standard dues renewal fees in effect for that year.

Signature of GLPWDC Breeder Member endorsing this application:

X _____

Please choose your designation(s): Breeder Exhibitor Dog Owner

How many years have you been involved with the PWD? _____

Are you a member of the Portuguese Water Dog Club of America? Yes No

How did you find out about the Great Lakes Portuguese Water Dog Club?

Your Breeder PWDCA Friend Web Search Other: _____

AREAS OF INTEREST: (Check all that apply)

Agility Conformation Grooming Obedience Pet Therapy

Tracking Water Work Other: _____

If you currently own a PWD(s), please tell us:

Call Name of Dog: _____ Age: _____

Call Name of Dog: _____ Age: _____

Call Name of Dog: _____ Age: _____

What special interests or talents do you have that you could share with the Club?

EVENT INPUT—What type of events would you be interested in attending?

Conformation Handling Seminar

Day Cruise with the PWDs

Fun Day with your PWD

Fun Matches for Obedience and Show

Junior Showmanship

Pet First Aid Workshop

Pet Grooming Workshop

Pet Therapy Workshop

Water Training Workshop

Fun Matches for Fetch, Rally or Scent

What Committees/Events would you be interested in helping?

- | | |
|--|--|
| Annual Meeting in October | National Specialty Basket Committee |
| Fundraising | Nominating Committee |
| Performance Event | Summer Picnic |
| Supported Entry | Water Training/Workshops and/or Trials |
| Club Ad Creation-(graphics experience) | Other: _____ |

CLUB COMMUNICATIONS:

GLPWDC Bylaws were recently approved allowing the use of email notifications for all Club business with member authorization. This authorization may be revoked in writing at any time by notifying the Club's Recording Secretary. We recognize that some members do not have email access and others may still be using slow internet access. To better service the members, we need each member to read and complete the following:

MUST COMPLETE BELOW – SELECT ONLY ONE

- Email for Everything -- I agree email may be used to notify me of all Club related business, announcements and other information as specified in the Bylaws (It is important to notify the Membership Chairperson and the Corresponding and the Recording Secretaries whenever you change your email address.
- U.S. Post Office Only – I do not have email access, OR I have slow internet service so please send everything via U.S. Post Office

Membership Applications and payments received in the last quarter of a calendar year will be applied to the following calendar year.

I (We) agree to abide with the Bylaws and the Policy and Procedure Manual of the Great Lakes Portuguese Water Dog Club, a copy of which is available on the club website at: glpwdc.com.

Signature of Primary Member: _____ **Date:** _____
Print or Type your Name

Signature of Secondary Member: _____ **Date:** _____
(living at the same address) **Print or Type Your Name**

To Mail your completed Application Form and check made payable to GLPWDC to:

(Utilize Step 4 on Page 1 to Submit Payment Via PayPal)

**Cathy McClellan
GLPWDC Membership Chair
4845 Sylvan Prairie Court
Sylvania, OH 43560**

STEP 5=Email your Application Form:



**Click Here to Email Form
to Cathy & Stan**