

THE AMERICAN BLOODHOUND CLUB

APPLICATION FOR MEMBERSHIP



I/WE HEREBY APPLY FOR THE MEMBERSHIP IN THE AMERICAN BLOODHOUND CLUB, SUBJECT TO THE APPROVAL OF THE ABC BOARD OF DIRECTORS AND MEMBERSHIP. I/WE ALSO AGREE TO ABIDE BY THE CONSTITUTION, BYLAWS, STANDING BOOK OF RULES, AND THE CODE OF ETHICS OF THE AMERICAN BLOODHOUND CLUB, AS WELL AS THE RULES AND REGULATIONS OF THE AMERICAN KENNEL CLUB.

TYPE OF MEMBERSHIP *(Select only one)*

INDIVIDUAL \$50
(18 years of age and over)
Canada \$60, Others \$70

FAMILY \$50
(18 years of age and over)
Canada \$60, Others \$70

JUNIOR \$30
(Under 18 years of age)
Canada \$40, Others \$50

BLOODHOUNDS OWNED _____

BLOODHOUNDS CURRENTLY OWNED _____

APPLICANT - FIRST NAME | LAST NAME *(FILL IN IF APPLYING FOR INDIVIDUAL, FAMILY OR JUNIOR MEMBERSHIP)*

SPOUSE - FIRST NAME | LAST NAME *(FILL IN ONLY IF APPLYING FOR FAMILY MEMBERSHIP)*

<p style="text-align: center;">Street Address</p> <p>_____</p> <p style="text-align: center;">City</p> <p>_____</p> <p style="text-align: center;">Country <i>(if not U.S.A)</i></p> <p>_____</p>	<p style="text-align: center;">State <i>(or Province or County)</i></p> <p>_____</p> <p style="text-align: center;">Phone Number</p> <p>_____</p>	<p style="text-align: center;">Kennel Name</p> <p>_____</p> <p>*Email Address <u>REQUIRED</u> for Newsletters</p> <p>_____</p> <p style="text-align: center;">Bloodhound-Specific Website Address</p> <p>_____</p>
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SPONSORS *Two (2) sponsors are required. Sponsors must be ABC members and not from the same Family Membership*

Sponsor One First Name (PLEASE PRINT) Last Name

Sponsor Signature

Sponsor Two First Name (PLEASE PRINT) Last Name

Sponsor Signature

INTERESTS *(Select all that apply)* PET SHOWING OBEDIENCE TRAILING OTHER _____

AMERICAN BLOODHOUND CLUB CODE OF ETHICS

- > I AGREE TO UPHOLD AND TO ABIDE BY THE AMERICAN BLOODHOUND CLUB CODE OF ETHICS.
- > I AGREE TO PROTECT AND IMPROVE THE BLOODHOUND, PUTTING THE WELFARE OF THE BLOODHOUND ABOVE PERSONAL GAIN OR PROFIT.
- > I AGREE TO PROVIDE EACH OWNER OF OUR BLOODHOUNDS, WHETHER PURCHASED OR TRANSFERRED, WITH ACCURATE RECORDS REGARDING PEDIGREE AND CERTIFICATE OF HEALTH, INCLUDING THE NAME, ADDRESS, AND TELEPHONE NUMBER OF THE ATTENDING VETERINARIAN.
- > I AGREE NOT TO PROVIDE ANY BLOODHOUND, EITHER BY SALE OR DONATION, TO ANY INDIVIDUAL, COMMERCIAL WHOLESALER, SALES AGENT, OR RETAILER FOR THE PURPOSE OF RESALE OR ANY OTHER TRANSFER OF OWNERSHIP TO A THIRD PARTY; OR AS A LOTTERY, AUCTION, RAFFLE, OR SIMILAR PRIZE; OR FOR RESEARCH.
- > I AGREE NOT TO PROMOTE INDISCRIMINATE BLOODHOUND BREEDING PRACTICES (FOR EXAMPLE, BY ADVERTISING THE AVAILABILITY OF "BREEDING PAIRS" OR "BITCHES IN WHELP" FOR SALE). WE AGREE TO ACT INSTEAD WITH DUE DILIGENCE IN BREEDING BLOODHOUNDS, BASING DECISIONS TO BREED ON A CAREFUL STUDY OF FACTORS SUCH AS FAMILY HISTORY, STRUCTURE, BREED TYPE, TEMPERAMENT, AND WORKING ABILITY, AS WELL AS TESTS (TAKING INTO ACCOUNT ADVANCING TECHNOLOGY AND TESTING AS RECOMMENDED BY THE AMERICAN BLOODHOUND CLUB HEALTH COMMITTEE) AND CERTIFICATIONS; AND TO FULLY DISCLOSE TEST AND OTHER INFORMATION ABOUT THE SIRE AND DAM TO PROSPECTIVE PUPPY BUYERS. WE ALSO AGREE NOT TO RELEASE ANY PUPPY, UNDER NORMAL CIRCUMSTANCES, TO ITS NEW OWNER PRIOR TO SEVEN WEEKS OF AGE OR WHAT THE LOCAL ORDINANCE STATES. IN BREEDING DECISIONS AND THE RELEASE OF PUPPIES, MEDICAL EXCEPTIONS AND CIRCUMSTANCES MAY BE TAKEN INTO CONSIDERATION.
- > I AGREE TO ASSUME RESPONSIBILITY, UPON WRITTEN NOTIFICATION, FOR ANY BLOODHOUND, ON WHOSE PAPERS OR BY MICROCHIP IDENTIFICATION WE ARE SHOWN AS BREEDERS, CO-BREEDERS, OR OWNERS THAT EITHER BECOME HOMELESS OR REQUIRES RE-HOMING. IDEALLY, WE WILL RESUME IMMEDIATE PHYSICAL CUSTODY OF THE BLOODHOUND AT OUR OWN EXPENSE. IF THE BLOODHOUND'S CONDITION (INCLUDING, BUT NOT LIMITED TO PHYSICAL INFIRMITY, AGE, ETC.) WOULD BE BEST SERVED BY AN ALTERNATIVE SOLUTION, WE AGREE TO ASSUME FULL FINANCIAL RESPONSIBILITY FOR THE BLOODHOUND UNTIL SUITABLE DISPOSITION OF THE BLOODHOUND CAN BE DETERMINED.
- > I AGREE TO EDUCATE THE PUBLIC ABOUT BLOODHOUNDS, THROUGH HONEST REPRESENTATION OF THE BREED'S INHERENT PERSONALITY, BREED CHARACTERISTICS, AND KNOWN HEALTH ISSUES.
- > TO OFFER ASSISTANCE, ENCOURAGEMENT, AND MENTORSHIP TO OTHER ABC MEMBERS AND, IN PARTICULAR, TO THOSE WHO ARE NEW TO THE BREED. WE ALSO AGREE NOT TO DEGRADE OR MAKE NEGATIVE COMMENTS ABOUT OTHER EXHIBITORS/BREEDERS OR THEIR DOGS, WHETHER IN PERSON OR ON ALL FORMS OF ELECTRONIC AND SOCIAL MEDIA.
- > TO ACT IN A SPORTSMANLIKE MANNER, AS BLOODHOUND OWNERS AND AS PARTICIPANTS IN ANY DOG-RELATED EVENT OR ACTIVITY; TO DEMONSTRATE GOODWILL; AND TO ACT WITH DIGNITY WHEN REPRESENTING THE BLOODHOUND BREED.

I/WE AGREE TO AND ACCEPT THE ABOVE CODE OF ETHICS AND ALSO AGREE TO ABIDE BY THE RULES SET FORTH IN THE CONSTITUTION, BYLAWS, AND STANDING BOOK OF RULES (SBR) OF THE AMERICAN BLOODHOUND CLUB.

➔ _____ *Applicant Signature* _____ *Signature Date*

➔ _____ *Applicant Signature* _____ *Signature Date*

Include initiation dues (amounts shown above) with application. Make checks payable (in U.S. funds) to: 'The American Bloodhound Club, Inc.'. The membership will be notified of this application through one of the club's official publications. The Board of Directors will vote on the application thirty (30) days after the membership has been notified. Upon acceptance, new members will receive subscriptions to the ABC Bulletin, the ABC Newsletter, the ABC Membership e-Directory & Handbook, one club decal and one club pin. If the application is rejected, the initiation dues will be refunded under separate cover. The club fiscal year runs from June 1 to May 31. Initiation dues submitted on or before January 1st will be applied to the current fiscal year. Initiation dues submitted after January 1st will be applied to the following fiscal year.

Send application, with remittance, to:
CINDY ANDREWS, MEMBERSHIP
AMERICAN BLOODHOUND CLUB
PO Box 7
ELKTON, VA 22827
E-MAIL: SECNCREEK@AOL.COM