



# WORKING RIESENSCHNAUZER FEDERATION

## APPLICATION FOR MEMBERSHIP

Dues:  \$30/per member per year  \$10/per Junior member per year

Please mail with check or money order (made payable to WRSF) to:

Martha Galuszka, Membership Director  
324 Oakwood Avenue, West Hartford, CT 06110

For additional information: 860-233-2286 or email: MJGALUSZKA@aol.com

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

SPOUSE: \_\_\_\_\_ FOR JUNIOR MEMBERSHIP (<18 yrs of age): DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

ORGANIZATION AFFILIATIONS:  USA  DVG  PSK  GSCA  OTHER/LOCAL CLUB: \_\_\_\_\_

RIESENSCHNAUZER (Giant)

SCHNAUZER (Standard)

ZWERGSCHNAUZER (Miniature)

# OF DOGS: \_\_\_\_\_ # OF BITCHES: \_\_\_\_\_ # OF DOGS: \_\_\_\_\_ # OF BITCHES: \_\_\_\_\_ # OF DOGS: \_\_\_\_\_ # OF BITCHES: \_\_\_\_\_

WORKING TITLES YOU HAVE EARNED WITH YOUR DOGS: \_\_\_\_\_

I HEARD ABOUT OR WAS REFERRED TO THE WRSF BY: \_\_\_\_\_

INTEREST/EXPERIENCE: I WOULD LIKE TO HELP THE WRSF BY DOING THE FOLLOWING: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**Optional for WRSF Records:** (Please attach a supplemental sheet if required)

Please complete the following information on each of your Schnauzers and enclose a copy of the pedigree or registration form if available.

1.) NAME: \_\_\_\_\_ REG. NO.: \_\_\_\_\_ OFA NO: \_\_\_\_\_

AGE WHEN PURCHASED: \_\_\_\_\_ BREEDER: \_\_\_\_\_

TITLES WHEN PURCHASED: \_\_\_\_\_

TITLES EARNED SINCE PURCHASE: \_\_\_\_\_

2.) NAME: \_\_\_\_\_ REG. NO.: \_\_\_\_\_ OFA NO: \_\_\_\_\_

AGE WHEN PURCHASED: \_\_\_\_\_ BREEDER: \_\_\_\_\_

TITLES WHEN PURCHASED: \_\_\_\_\_

TITLES EARNED SINCE PURCHASE: \_\_\_\_\_

**FOR WRSF USE ONLY:** MEMBERSHIP NUMBER ASSIGNED: \_\_\_\_\_ FROM: \_\_\_\_\_ TO EXPIRES: \_\_\_\_\_