

OFFICE USE: Key Code: _____ NEW MEMBERS OR RENEW OF LAPSED



yippee!

SADDLEBROOKE DOG PARK ASSOCIATION NEW MEMBERSHIP FORM

Name(s) _____
Address _____ Unit Number _____
Phone _____ E Mail _____
Dog Name and Breed _____
Dog Name and Breed _____
Dog Name and Breed _____

Proof of current rabies vaccination must be presented before your key card is issued. It is your responsibility to submit updated proof of rabies information to SDPA. Members must be residents of Saddlebrooke. Failure to observe these rules will result in deactivation of key card.

Membership includes: (1) Unlimited use of the dog park; (2) Personal access key card; (3) Yearly subscription to newsletter; (4) Advance notice of dog park special events

Your initial membership is \$100.00 per household plus \$10 for a key card, for a total of \$110. This fee includes dues through December 31 of the year you join. Annual dues for **returning** members are due by January 31st and are past due on February 15th. **New** members who joined on/after November 1st pay no dues the following year. Make check payable to SaddleBrooke Dog Park Association (SDPA).

Contact: Membership Chairman.

Email communications are preferred. Please call only on M-F between 9am to 4pm.

Mail to: **SaddleBrooke Dog Park Association, P.O. Box 8415, Tucson, AZ 85738-0415**

Membership is non-refundable and non-transferable.

DONATIONS ARE WELCOME. You will be recognized in the newsletter.

Check the activities you would like to volunteer for:

- Park Maintenance
- Newsletter
- Pet rescue
- Special events
- Corp. Donations
- Other, please explain _____
- Fundraising
- Membership
- Future Board Member
- Finance
- Rules/Safet5

I agree to membership as written in the SDPA Bylaws. I understand that the small dog park area is restricted to dogs that are 30 lbs. or less. I attest that I have read the dog park rules and etiquette document provided on the website, and that my membership is contingent on full compliance of these SDPA rules. The Board of Directors reserves the right as a body to revoke membership because of non-compliance to the rules and Bylaws. I agree that I am responsible for the conduct of my dog(s) or my guest's dog(s) while in the park.

Exclude me from the membership phone directory? Yes No

Signed: _____

Date: _____

SDPA is a private not for profit 501 (c)(04) organization. Your donation is not tax deductible.

Website: www.saddlebrookedogpark.com