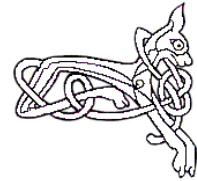


Great Lakes  
Irish Wolfhound Association  
Membership Enrollment



Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ Phone (alt) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

This membership is (please check all that apply):

- New       Renewal       1 year       2 years       3 years

~ All memberships become due in April ~

- Individual Membership**  
 ~\$20 per year  
 ~For adults over 18 years of age  
 ~Entitles member to all rights and privileges

Membership dues enclosed: \$ \_\_\_\_\_

Donation enclosed: \$ \_\_\_\_\_

Total amount: \$ \_\_\_\_\_

- RESCUE AND WELFARE DONATIONS** \$ \_\_\_\_\_  
 A strictly voluntary donation to the GLIWA  
 Rescue & Welfare Fund- to be used solely for  
 the healthcare and placement of rescued Irish  
 wolfhounds.

Make checks payable to Great Lakes Irish Wolfhound Association

- EDUCATION FUND DONATION** \$ \_\_\_\_\_  
 A strictly voluntary donation to be used solely  
 for educational materials (i.e. pamphlets,  
 handouts, etc.), displays and programs.

\_\_\_\_\_  
 Signature

- TROPHY AND AWARD DONATION** \$ \_\_\_\_\_  
 A strictly voluntary donation to be used for our  
 Annual Spring Match.

- Family Membership**  
 ~\$30 per year  
 ~Entitles Family to one copy of the newsletter  
 ~Age restrictions are the same as for individual  
 and junior memberships.  
 ~Entitles members to all rights and privileges.

For office use only	
Dues Received	_____
Donation Received	_____
Date current membership expires	_____

Please list additional family members and dogs' names

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please mail enrollment form to:  
 Great Lakes Irish Wolfhound Association  
 c/o Mark Bettin, Treasurer  
 19908 Center St.  
 Mokena, IL 60448