



2026 KEYSTONE DOCKDOGS MEMBERSHIP APPLICATION

MEMBERSHIP DUES

___ \$35 Single Membership (One person, 4 dogs; \$5 per additional dog)

___ \$55 Family Membership (More than one person, unlimited dogs)

___ FREE Youth Membership (7yo-16yo)*

OWNER HANDLER INFORMATION: (PLEASE PRINT)

First Name: _____ Last Name: _____

DOB __/__/__

Address: _____ Street City State Zip

Phone Home: _____ Cell: _____

Email Address: _____

ADDITIONAL FAMILY MEMBERS: (must live in the same household)

1. _____ Email Address _____ DOB __/__/__

2. _____ Email Address _____ DOB __/__/__

3. _____ Email Address _____ DOB __/__/__

4. _____ Email Address _____ DOB __/__/__

Include Email address if additional family members wish to receive correspondence.

DOG INFORMATION:

1st Dog Name _____ DOB __/__/__ M__F__ Breed: _____

2nd Dog Name _____ DOB __/__/__ M__F__ Breed: _____

3rd Dog Name _____ DOB __/__/__ M__F__ Breed: _____

4th Dog Name _____ DOB __/__/__ M__F__ Breed: _____

Special Discounts*:

Salute Special: \$10 off membership for active or retired military or police (proof required) _____

Prime Time Special: \$5 off membership for individuals 60yr+ _____

**Discounts cannot be combined, please choose the higher of the two. If applicable, apply to submitted payment.*

SIGNATURE: _____ Date: _____

PAYMENT INFORMATION:

Checks payable to "Keystone DockDogs"/Mail to:

Travis Reish, 313 Juniper Dr, Etters, PA 17319

PayPal: treasurer.kdd@gmail.com

To be completed by club treasurer:

Received From: _____ the sum of _____ for membership dues. Effective Date: __/__/__ Received

By: _____ Cash: ___ Check: ___ PayPal: _____ Date: _____