



SENIOR CONFORMATION JUDGES ASSOCIATION, INC

APPLICATION for MEMBERSHIP

(Please Print)

CHECK ONE: _____ **New Application** _____ **Renewal/Update**

Name: _____
Last First MI

Address: _____
Street City State Zip

Day Phone: (_____) _____ **Evening Phone:** (_____) _____

Cell Phone: (_____) _____ **Fax:** (_____) _____

E-Mail: _____

Occupation: _____ (If retired, former occupation)

YR Initially Approved to Judge: _____ **Grp(s) Jdged:** _____

Original Breed(s) Owned: _____
(Please give "owned as of" date)

Are you an AKC Delegate: _____ **For Which Club:** _____

Please list other areas of expertise (speaker, breed presenter, writer, public relations, word processor, etc.), which may be useful to further the goals and aims of the SCJA.

Signature **Date**

ANNUAL DUES:
\$25

**Complete application,
Make Check Payable to
SCJA, and Mail to:**

**Karen Sawyer
SCJA - Membership
7188 Jay Ray Way
Nokesville, VA 20181**

SCJA JUDGE'S NAME BADGE

A JUDGE'S NAME BADGE is furnished at no charge to new members. Please email us at karen@scja.org to let us know how you would like your name to appear on the name badge and which type of backing you would prefer: 1) pin 2) magnet