

Canadian Professional Handlers Association

New Membership Application

Please complete the follow	ing applicati	ion in full:				Page 1
CKC Membership Number_	How mar	How many years have you been a membe				
NAME(S):						
ADDRESS:						
CITY:		PROVINCE:	P(OSTAL CODI	Ē:	
PHONE: Home	Cell	EN	/IAIL:			
How long have you been in	volved with	dogs?				
What is your experience in dogs?						
Have you ever worked for a service?I						
Do you have any other expedogs?		•		•		_
What is your dog show veh						
Have you ever been discipli		CKC?If ye	es, please	give		

Do you own	Lease	kennel facilities?	Page 2
diagrams? Also plea	• •	your kennel facilities and include plication your business card, clier	•
may be housed in a the number of dogs using this option pl	home environment but they care for on a day	not required to have actual kenner one must appreciate that those to day basis to a manageable nunuling unit and size and tell us how a modate comfortably.	numbers will limit
Name(s) of the app	licant(s)		
Signature(s) of app	licant(s)		
Name and signatur	e of CPHA Sponsor #1		
Name and signatur	e of CPHA Sponsor #2		
All applicants agree	to abide by the attache	ed	

CANADIAN PROFESSIONAL HANDLERS ASSOCTION CODE OF ETHICS

All applications must be accompanied by the fee of \$ 100. Payable to the Canadian Professional Handlers Association.

Please mail to Shannon Scheer 16333 104th Street SE Calgary, AB T3S 0A8

Alternatingly you may scan and e-mail the documents to mail@shannonscheer.ca and do an Interac e-transfer to Shannon Scheer at above e-mail using the password prohandler if prompted.