



## Pacific Northwest Police Detection Dog Association Membership Application.

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Name: \_\_\_\_\_ Contact email: \_\_\_\_\_

Agency \_\_\_\_\_

Title / Rank \_\_\_\_\_ Handler / Trainer / Supervisor.

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Mailing address: \_\_\_\_\_

Zip: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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K9 Partner's name: \_\_\_\_\_ Single / Dual Purpose.

How many years in service? \_\_\_\_\_.

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Applicants signature: \_\_\_\_\_ Dated: \_\_\_\_/\_\_\_\_/\_\_\_\_

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**Membership Dues: Law Enforcement: \$50.00 Annually.**

**Pay by mail: Please make checks payable to PNWK9, PO Box 1958, Mt Vernon WA. 98273.**

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**Payment by Credit Card:**

Card # \_\_\_\_\_ expires: \_\_\_\_/\_\_\_\_/\_\_\_\_. Security Code \_\_\_\_\_.  
(Visa, MC, AMEX, )