



## **The American Bullmastiff Association MEMBERSHIP APPLICATION AGREEMENT**

If you have question, please contact the ABA Membership Chair:

Tim Brubaker

979-220-9868

abamemberbmf@gmail.com

**IMPORTANT:** Please read guidelines on the following pages of the application.

I herewith apply for membership in the American Bullmastiff Association. I am in good standing with the American Kennel Club. I agree to abide by the ABA constitution, By-Laws, Standing Rules, and the rules of the American Kennel Club.

I further agree that I will not sell, consign, or donate dogs to commercial wholesalers or retailers, or to auction/raffle of any type, and will not aid and/or abet the sale of dogs from such persons or establishments.

I shall endeavor to protect and advance the interest of the Breed, and to act in a sportsmanlike manner at dog shows and other sanctioned events.

I agree to breed responsibly, and to make immediate accommodations to retrieve or make fiscal arrangements for the care and housing of any dog that is a result of my breeding program that is in need of assistance for any reason, whether the dog in need is the get of a bitch I own(ed) or co-own(ed) and bred, or of a stud dog I own(ed) or co-own(ed) and allowed to be used in a breeding program.

I will not allow any dog under my/our control to be used or sold for the purpose of cross breeding or dog fighting.

Conduct considered prejudicial to the best interest of the Association, the breed, or violation of the terms and conditions of this application can or will result in disciplinary action in accordance with the Association's Constitution, By-Laws, Standing Rules, and Roberts Rules of Order.

The American Bullmastiff Association, Inc. is a private club and has the right to accept or reject a membership at its discretion for what it considers cause.

I agree to hold the American Bullmastiff Association and its officers and directors harmless from any and all claims resulting from such disciplinary actions providing that their actions are in accordance with the Association's Constitution, By-Laws, Standing Rules, and Roberts Rules of Order.

**\*\*If this application is for a joint membership, each applicant must fill out a separate application. Please mail applications and dues together and note here if this will be a joint application.**

Joint application to be included with: \_\_\_\_\_ (name of other party included in joint application)

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Occupation: \_\_\_\_\_

Home Telephone Number: \_\_\_\_\_

Work Telephone Number: \_\_\_\_\_

\*Email Address: \_\_\_\_\_

Kennel Name: \_\_\_\_\_

Website: \_\_\_\_\_

**\*The ABA does not share our membership list or allow it to be used by anyone, except for the express purpose of communicating ABA events and ABA information with the membership.**

**\*The ABA Newsletter is delivered 6 times a year via email. If you are not able to receive an emailed newsletter, please contact the ABA Corresponding Secretary to make other arrangements.**

Please answer all of the following that apply:

When did you get your first Bullmastiff? \_\_\_\_\_

How many Bullmastiffs do you own? \_\_\_\_\_ Co-own? \_\_\_\_\_

Name of Breeder(s) of your Bullmastiff(s): \_\_\_\_\_

Other breeds (Please list breeds and numbers of dogs in the household): \_\_\_\_\_

Do you participate in any of the following? (check all that apply)

Conformation \_\_\_ Obedience \_\_\_ Rally \_\_\_ Rescue \_\_\_ Therapy dog \_\_\_ Agility \_\_\_ Tracking \_\_\_

Do you breed? \_\_\_\_\_ If yes, approximately how many litters per year? \_\_\_\_\_

How many litters have you bred or co-bred of other breeds?  
\_\_\_\_\_

Do you use the AKC's Limited Registration? \_\_\_\_\_

Do you require spay/neuter of pet quality puppies/adults?  
\_\_\_\_\_

Do you microchip puppies you breed? \_\_\_\_\_ If "yes" please specify which microchip you use?  
\_\_\_\_\_

Have you ever been denied membership to a dog related club?  
\_\_\_\_\_

If yes, Please explain:  
\_\_\_\_\_

Have you ever been suspended by the AKC? \_\_\_\_\_

If yes, please explain:  
\_\_\_\_\_

Are you or is anyone in your household involved in any dog or animal related business? \_\_\_\_\_

If yes, please explain:  
\_\_\_\_\_

Are you interested in serving the ABA in any voluntary capacity?  
\_\_\_\_\_

My strengths and/or interest are in the following areas:  
\_\_\_\_\_

Date of application: \_\_\_\_\_ \*Please make fees payable to: The American Bullmastiff Association, Inc.

I enclose my check or money order in the amount of \$\_\_\_\_\_. My signature on this document verifies that the information provided herein is complete and truthful to the best of my knowledge. Any falsehood may be grounds for expulsion.

Signature:  
\_\_\_\_\_

**Applicant Sponsorship**

Proposing member and seconding member must have been members in good standing with the American Bullmastiff Association for one year. Application cannot be processed until these signatures are secured. If you have any questions on how you may obtain these signatures, please contact the Membership Chairperson.

Name of Member Proposing: \_\_\_\_\_

(Please print)

Number of years that you have known the applicant? \_\_\_\_\_

Have you ever visited the applicant's home? \_\_\_\_\_

Do you own or co-own dogs with the applicant? \_\_\_\_\_

Please provide any information you feel would be useful to the ABA in considering this applicant:

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

By signing for this applicant, I attest that the above information is true and I hereby endorse this applicant for membership.

Signature: \_\_\_\_\_

Name of Member Seconding: \_\_\_\_\_

(Please print)

Number of years that you have known the applicant? \_\_\_\_\_

Have you ever visited the applicant's home? \_\_\_\_\_

Do you own or co-own dogs with the applicant? \_\_\_\_\_

Please provide any information you feel would be useful to the ABA in considering this applicant:

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

By signing for this applicant, I attest that the above information is true and I hereby endorse this applicant for membership.

Signature: \_\_\_\_\_

## DUES/FEES SCHEDULE

Mail completed agreement and your check to the ABA Treasurer:

**Kelli Feeney**

**P.O. Box 948411**

**Maitland, FL 32794**

[amffbullies@gmail.com](mailto:amffbullies@gmail.com)

Checks should be made payable to the ABA, Inc. The ABA is able to accept payments in US funds drawn on US banks only. **Checks will be deposited upon receipt. If your membership application is not approved- the ABA will refund your application fee and dues within 30 Days of notification of same.**

The process of joining the American Bullmastiff Association may take as long as 4 months, depending on when your application is received. The ABA newsletter is published every other month starting with February. In order to become a member of the ABA, you must be published as an applicant in the Newsletter. If there are no objections to your application, you will be published in the following Newsletter as a new member.

Your application will not be included if it is incomplete or the payment is incorrect. You will be notified by the Membership Chair to make the necessary corrections.

Members being proposed in the October, December and February Newsletters must pay a full year dues. Members being proposed in the April, June, and August Newsletter should pay only one-half years dues.

PLEASE NOTE: You will receive your membership renewal notice yearly, due by November 1. Those members who have paid half years dues up to and including August will be responsible for a full year's payment due on November 1.

### INITIAL DUES

Single Membership \$45.00

\*Joint Membership \$65.00

Junior Membership \$30.00

Senior Membership (65+) \$30.00

(Single or joint)

### HALF-YEARS DUES

Single Membership \$27.50

Joint Membership \$42.50

Junior Membership \$20.00

Senior Membership \$20.00

\*Joint members must live in the same household. Please fill out a separate application but mail check and applications in the same envelope.

All prices include the one time initiation fee.

No additional postage with in the 50 United States.

\$10.00 additional postage for Canada.

\$25.00 additional postage for all other countries.

**JUNIOR MEMBERSHIP**

To be eligible for Junior Membership status, the applicant must be over 9 years of age and less than 18 years of age at the time of the application. Junior Membership carries no voting privileges and is not considered when determining a quorum. Should a Junior Member turn 18 during a fiscal year (November – October), he/she will automatically become a regular member without additional fees or dues. The Junior Member should inform the Membership Chair upon reaching 18 years of age.

Birth Date of Junior Applicant: \_\_\_\_\_ Age at time of Application: \_\_\_\_\_

**SENIOR MEMBERSHIP**

To be eligible for Senior Membership status the applicant must be over 65 years of age. In case of joint applications, only one member must be 65 or over.

---

---

(For use by ABA only)

Date Received by the Membership Chairperson: \_\_\_\_\_

Fees Paid: \_\_\_\_\_

Check Number: \_\_\_\_\_

Date action taken on application: \_\_\_\_\_

Favorable: YES NO