



Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

NAVHDA International Member #: \_\_\_\_\_

Breed and Ages of Dog(s):

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

Please include check, payable to SPOON RIVER NAVHDA, for \$40.00 for yearly dues and send hard copy to:

Spoon River NAVHDA  
Jeff Sikora -Treasurer  
702 N. Clinton St.  
Bloomington, IL 61701

Email: [jeff@jmhcpa.net](mailto:jeff@jmhcpa.net)