

Membership Application
Gazehounds Of New England (GONE)

Gone

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail address: _____

What Breed(s) are you coursing? _____

List ANY titles your dog(s) have earned: _____

Please indicate jobs at which you have experience and those you would be willing to learn:

Experienced	Will Learn	Job Name	Experienced	Will Learn	Job Name
		Inspection			Paddock
		Field Trial Secretary			Field Clerk
		Hunt Master			ASFA Judge
		Lure Operation			

**Please enclose \$15 for a 1 year single or family membership.
 Checks should be made payable to: GONE.**

Mail this completed membership form and payment to:

**Lisa Buzzell
 175 S. Acton Road
 Stow, MA 01775**

In becoming a member of Gazehounds of New England, I agree to abide by its constitution and by-laws and those of all coursing organizations under which GONE holds sanctioned trials.

Signature: _____ Date: _____