



AUSTRALIAN SHEPHERD CLUB OF AMERICA[®]

6091 E State Hwy 21
Bryan, TX 77808
www.asca.org

P: (979) 778-1082
F: (979) 778-1898
agility@asca.org

⚠ ATTENTION AFFILIATE CLUB REPRESENTATIVES ⚠

All officers of your club must be current, full (Single, Dual, or Lifetime) ASCA members.

Please take extra care to make sure **ALL** information is included when you return your renewal. This will help avoid extra paperwork and time for both the Business Office and your club.

ALL FORMS INCLUDED IN THIS PACKET MUST BE RETURNED TO THE BUSINESS OFFICE

RENEWAL FEE: \$100.00

DONATIONS INFORMATION

Did you know that ASCA is financially responsible for the costs associated with hosting the Stock, Agility, Obedience, Conformation, and Junior Finals held at the Nationals each year?

Affiliate clubs and ASCA members can make donations to the National Finals to help defray the cost. When your club finds itself with a few dollars left from hosting an event (or perhaps your club could hold a raffle to make a donation), just send a check to the ASCA Business Office with a notation stating that it is to be used for the ASCA (venue) Finals and we will ensure that is where the money is used. Your club can also donate to the ASCA Foundation this way and again you can specify what the money is to be used for.

Thank you in advance for your cooperation!



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Date: _____ Name of Club: _____

All Affiliate Clubs **must** have this packet postmarked **no later than**
January 31 or the club will lose all show privileges.
NO EXCEPTIONS. (Can be postmarked 1/31).

TO BE ELIGIBLE FOR RENEWAL

- Each Affiliate Club **must** host at least one **(1) ASCA sanctioned event** and at least one **(1) educational project** yearly. Examples of educational projects are: Eye Clinic, Handling Clinic, Obedience, Working, or Agility Clinics.
- Each Affiliate Club **must** have at least ten **(10) individual members.**

IF YOUR CLUB HAS MET THESE REQUIREMENTS, PLEASE SUBMIT THE FOLLOWING INFORMATION TO THE ASCA BUSINESS OFFICE BY **JANUARY 31.**

CHECKLIST:

- Renewal fee of \$100.00.
- A list of all members (including addresses and phone numbers).
- Officer Change Form(s) completed, if applicable. (Need all signatures).
- Completed section regarding sanctioned events and educational events for the previous year.
- Completed Show Coordinators Report for the year (included in packet).
- Completed ASCA Trademark License Application (included in packet).

NOTE: IF ANY INFORMATION IS OMITTED, THIS APPLICATION WILL BE RETURNED IMMEDIATELY

Please write in the number of events held by your club during 2011

Conformation	Obedience	Tracking	Working Trials	Agility	Rally	Educational Events

- Please list all dates and locations of sanctioned events in 2011. You may use additional paper if necessary.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

- Please list all educational events sponsored by your club during 2011.
(Example: Eye Clinics, Obedience Clinics, DNA blood draws, etc.)

1. _____
2. _____
3. _____
4. _____

- Please list all other breed activities sponsored by your club during 2011.
(Example: Fund Raiser, Sponsorship, Donations, etc.)

1. _____
2. _____
3. _____
4. _____

Affiliate Club Website: _____

CLUB OFFICERS FOR 2012

All club Officers/Directors must be full ASCA members in good standing with the club

Affiliate Rep: _____ Membership #: _____

President: _____ Membership #: _____

1st V.P.: _____ Membership #: _____

2nd V.P.: _____ Membership #: _____

Secretary: _____ Membership #: _____

Treasurer: _____ Membership #: _____

1st Director: _____ Membership #: _____

2nd Director: _____ Membership #: _____

3rd Director: _____ Membership #: _____

4th Director: _____ Membership #: _____

5th Director: _____ Membership #: _____

We the undersigned, apply for membership renewal to the Australian Shepherd Club of America® as Affiliate Officers of the above named club. As official representatives of that affiliate, we agree that our club will abide by the ASCA Articles of Incorporation, Bylaws, Dispute Rules, ASCA Registry Rules and all ASCA programs.

President

Date

Affiliate Rep

Date

MUST HAVE PRESIDENT'S AND AFFILIATE REP'S SIGNATURES



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AFFILIATE OFFICER CHANGES

PLEASE REPORT **ANY** CHANGE IN OFFICERS FOR YOUR CLUB ON THIS FORM AND RETURN IT TO THE ASCA BUSINESS OFFICE.

THIS FORM MUST BE SIGNED BY THREE CURRENT OFFICERS OF THE CLUB OR IT WILL BE RETURNED.

Date: _____ Name of Affiliate Club: _____

POSITION: President Representative 1ST V.P. 2ND V.P. Secretary Treasurer Director

FROM Name: _____ ASCA Membership #: _____

TO Name: _____ ASCA Membership #: _____

POSITION: President Representative 1ST V.P. 2ND V.P. Secretary Treasurer Director

FROM Name: _____ ASCA Membership #: _____

TO Name: _____ ASCA Membership #: _____

POSITION: President Representative 1ST V.P. 2ND V.P. Secretary Treasurer Director

FROM Name: _____ ASCA Membership #: _____

TO Name: _____ ASCA Membership #: _____

THE ABOVE CHANGES IN OFFICERS FOR OUR CLUB ARE CORRECT TO THE BEST OF OUR KNOWLEDGE.

Officer 1: _____ Membership #: _____ Date: _____

Officer 2: _____ Membership #: _____ Date: _____

Officer 3: _____ Membership #: _____ Date: _____

YOU MAY PRODUCE ADDITIONAL COPIES OF THIS FORM IF NECESSARY



AUSTRALIAN SHEPHERD CLUB OF AMERICA®

TRADEMARK LICENSE

The Australian Shepherd Club of America is a Washington State nonprofit corporation, is called "ASCA" in this agreement. The party identified here is called "Licensee" in this agreement.

State licensee of affiliate club name: _____

ASCA has adopted and is using the trademarks: ASCA®, Australian Shepherd Club of America®, Aussie Times, and the Australian Shepherd Dog Bust Logo. Licensee acknowledges the validity of ASCA's title to these marks and agrees not to contest such title. Licensee wishes to use the following of these marks:

Check all trademarks that apply

<input type="checkbox"/> ASCA	<input type="checkbox"/> Australian Shepherd Club of America
<input type="checkbox"/> Australian Shepherd Dog Bust Logo	<input type="checkbox"/> Aussie Times

In consideration of the mutual promises contained in this license, ASCA grants to Licensee a non-exclusive, revocable right the use the mark(s) checked above solely in conjunction with:

Specifically describes uses approved by the ASCA Board

<input type="checkbox"/> ASCA Sanctioned Events Judge's Gift	<input type="checkbox"/> ASCA Sanctioned Event Ribbons/Awards
<input type="checkbox"/> ASCA Affiliate Club Equipment	<input type="checkbox"/> Other: _____

ASCA may revoke this license at any time in its absolute and sole discretion. Unless revoked, this license remains in effect:

Specify duration

<input type="checkbox"/> For the single use stated above	<input type="checkbox"/> Annual Affiliate Renewal
<input type="checkbox"/> Until (date): _____	

Licensee shall pay ASCA up front and percentage royalty fees as stated below. Up front fees are payable upon the signing of this license. Percentage royalty payments are due monthly, paid within 15 days of the close of the month. Percentage royalty payments shall be accompanied by a statement showing all of that month's receipts from goods and services using the marks.

Specify any fees that apply

<input type="checkbox"/> No fees	<input type="checkbox"/> Upfront fee of \$ _____
<input type="checkbox"/> _____ percent of revenues from goods or services using the marks.	

Licensee shall use the mark(s) only in connection with goods and services which meet the standards, specification and quantities established by ASCA. Licensee shall submit each use of the mark(s) for approval by ASCA before initiating such use. ASCA has the right, at all reasonable times, to inspect Licensee's goods and services employing the mark(s) to determine they are of a quality acceptable to ASCA.

License Date: _____

Signature of Licensee's Authorized Agent or Affiliate Rep.

Signature of ASCA's Authorized Agent



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2012 ASCA SHOW COORDINATORS



PRINT NAME OF AFFILIATE CLUB ON LINE ABOVE



Please list the person(s) your club has appointed as Show Coordinator(s).

PLEASE PRINT OR TYPE

Member's Name

ASCA Membership Number

Address, City, State, Zip

Phone

Email

Signature of Show Coordinator

Member's Name

ASCA Membership Number

Address, City, State, Zip

Phone

Email

Signature of Show Coordinator

Member's Name

ASCA Membership Number

Address, City, State, Zip

Phone

Email

Signature of Show Coordinator

The person(s) listed above has/have been appointed as ASCA Show Coordinator(s). Show Coordinators sign and are responsible for all paperwork pertaining to all ASCA show/trial programs, and are the liaison between our club and the ASCA Business Office.

Signature of Club President

Membership No.

Date

Signature of Club Secretary

Membership No.

Date