



Dog Owners' Training Club of MD
505 South Bend Court
Westminster, MD 21157

OFFICE USE ONLY

DATE RECEIVED _____
PREFERRED CONTACT METHOD:
EMAIL PHONE
DATE REVIEWED _____
DATE COMMITTEE APPROVED _____
DATE BOARD APPROVED _____

Dog Owner's Training Club (DOTC) has established a financial assistance fund for members that may be experiencing financial hardship and need to request reduced or waived membership fees. All requests are confidential. Interested members can either mail the application to Cleo Curry 2015 Mount View Road Marriottsville, MD 21104, or email cleocurry@msn.com. Applications will be reviewed ONLY by the Committee members. Once approved, the Committee will propose to the Board that financial assistance be granted.

ELIGIBILITY CRITERIA

- **Must be a Regular Member (i.e. been voted into membership)**
- **Must be actively training with the club**
- **Must have donated a MINIMUM of 20 hours of volunteer time**

FIRST NAME _____ LAST NAME _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

DATE OF BIRTH _____

Email: _____

Phone Number _____ Cell Home

Please select: *

We are requesting DOTC to waive the entire membership fee due to financial hardship.

We are experiencing financial hardship and can pay a reduced fee of \$_____ this year.

HAVE YOU EVER APPLIED FOR FINANCIAL ASSISTANCE WITH DOTC? YES NO

Please describe the nature of your hardship. Provide as much information as you are comfortable sharing. You may attach a letter of explanation to your application as needed.

Please list the events, dates, and hours of all your club volunteer experience.

Please tell us what your future plans are for you and your dog, and how training will help you achieve your goals.

Signature

Date