



GSDCA-WDA MEMBERCLUB
OFFICERS and MEMBERS ROSTER

Date: _____

Club Name: _____

Name of Club Contact: _____ WDA Member # _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

OFFICERS

President: _____ WDA Member # _____

Address: _____

Phone: _____ Email: _____

Vice President: _____ WDA Member # _____

Address: _____

Phone: _____ Email: _____

Secretary: _____ WDA Member # _____

Address: _____

Phone: _____ Email: _____

Treasurer: _____ WDA Member # _____

Address: _____

Phone: _____ Email: _____

Training Director: _____ WDA Member # _____

Address: _____

Phone: _____ Email: _____

MEMBERS – Please list all members

Name: _____ WDA Member # _____

Address: _____

Phone: _____ Email: _____

Name: _____ WDA Member # _____

Address: _____

Phone: _____ Email: _____

Name: _____ WDA Member # _____

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