

OSDS Membership Application Form

Oregon Sheep Dog Society



Purpose and objectives of the Oregon Sheepdog Society (OSDS): (from the Bylaws)

The purpose and objective of the Society shall be to serve the common interest of the members and to promote and protect the best interests of the Society in the following manner:

- To promote, maintain and elevate the standards of the proficiency in the management and training of the working sheepdog for trial and farm use through clinics, competitions gatherings and other service to its members.
- To cultivate cooperation among the members, to promote and protect the best interest of the Society and to cooperate with and support organizations with similar purposes and objectives.

The Oregon Sheepdog Society was founded in 1938 to secure better management of livestock by improving the working sheepdog at trials and on the farm; to achieve good management and training as the main object by which such means as the Society may from time to time determine. The Society sanctions and recognizes trials, clinics, training classes and other gatherings of working sheepdogs and their owners. Even though the Society name is Oregon, the membership is not limited geographically to one state. Although most of the dogs that compete in sheepdog trials are Border Collies, the society welcomes all breeds of working dogs.

Membership in OSDS is open to anyone who accepts and abides by the bylaws and is interested in promoting, maintaining and elevating the standards of proficiency in the management and training of the working sheepdog for livestock.

A member in good standing is eligible to cast one ballot (two ballots for a family membership) for annually elected officers, vote at the annual meeting and receive the OSDS newsletter. Members may apply for Liability Insurance for trials and clinics held Oregon, Washington, Idaho or California. Members also accumulate points for the annual Top Team Awards.

Dues are paid annually on January 1.

- _____ \$20 Single dues for Newsletter and Insurance
- _____ \$30 Family dues for newsletter and Insurance
- _____ \$200 Lifetime Single Membership
- _____ \$300 Lifetime Family Membership

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Phone(_____) _____ E-mail _____

Make checks payable to **OSDS** in U.S. dollars and mail to: Donna Grimes, P.O. Box 679, Athena, Or. 97813-0679 E-mail at djgrimes@uci.net.