Mo-Kan Pet Partners Association
Membership Renewal
Please Print Clearly

Member(s) _____

_____

E-Mail _____

Phone (Home) _____ **(Cell)** _____

Home Address _____
(Street)

_____
(City) (State) (Zip)

Partner's Name	**Breed**	**DOB**	**Date Registration Expires**

$15 Annually Per Family **Check #**_____

Checks should be made payable to Mo-Kan Pet Partners and mailed with this form to: Margaret Bathke, Treasurer, 503 Hargis Lane, Belton, Missouri 64012

I agree to abide by the Constitution and Bylaws of Mo-Kan Pet Partners Association.
Constitution & Bylaws are located on our website, www.mo-kanpetpartners.org.

Signed _____

Signed _____

Date _____