

The American Fox Terrier Club

Breeder Referral Application Form



Fill out this form and mail with a signed copy of the Code of Ethics to:

Sheila Thulin
24115 S. Fork Road
Twain Harte, CA 95383

First Name _____
Last Name _____
Kennel Prefix _____
City/State/Zip _____
Breed _____ Smooth _____ or _____ Wire _____

CHECK CONTACT INFORMATION YOU WANT PUBLISHED

Home Phone _____ Yes _____
Cell Phone _____ Yes _____
Email _____ Yes _____

List me on the AFTC website in the categories checked below.

<input type="checkbox"/> Puppies
<input type="checkbox"/> Stud Service
<input type="checkbox"/> Adults Available
<input type="checkbox"/> Grooming

<input type="checkbox"/> Boarding
<input type="checkbox"/> Training
<input type="checkbox"/> Willing to give breed information

Sign _____ Date _____