



The Hudson Highlands Hunting Retriever Association, Inc. is an organization dedicated to the proper education of owners, handlers and the public in the use and training of purebred hunting retrievers. Whether you're a novice or experienced handler, or just considering the purchase of a purebred hunting retriever, the Hudson Highlands Hunting Retriever Association, Inc. is interested in helping you and your dog.

The objectives of the Hudson Highlands Hunting Retriever Association are:

1. To educate handlers, owners and the general public, and to encourage and promote quality in the breeding and field testing of hunting retrievers.
2. To protect and advance the interests of hunting retrievers through education and encouraging sportsmanlike participation at hunting field tests.
3. To conduct training sessions, club and licensed hunting retriever field tests under the rules of the Hudson Highlands Hunting Retriever Association (HHHRA), the North American Hunting Retriever Association (NAHRA) and/or the American Kennel Club (AKC).
4. To promote the use of trained retrievers as a conservation tool, and efforts to preserve and improve wildlife habitats.

Membership Procedure

If you agree with the listed objectives and are interested in developing a bond like no other with your dog and would like to participate in training sessions, field trials, hunt tests, etc. then we hope you will join our organization.

As part of your membership with HHHRA, the following requirements must be met:

- **Complete and submit a membership application along with a check for the annual membership fee.** Once received by the Club Secretary, your membership will be presented to the entire membership for consideration and vote. Once voted into HHHRA by the membership, you will start to receive the HHHRA newsletter and all club mailings including the club meeting notices.
- **You need to attend at least one club meeting and/or help at two club sponsored events.** Club meetings are held in the months of August and December. From the date a membership application is received, a member will have one year to fulfill the membership requirements. If the member fails to fulfill the requirements in the allotted time period, they will be required to submit a new application and a new check for dues if they still wish to become a member. No refund will be made for dues submitted if the membership requirements are not met in the allotted time period.

Questions?? Need more information?...

Please feel free to contact Kim Schiller, HHHRA Secretary via:

Phone - (845) 742-3093

Email – patriotridge@frontiernet.net

Realize the full potential of your retriever...Join Hudson Highlands Hunting Retriever Association



The Hudson Highlands Hunting Retriever Association, Inc.

MEMBERSHIP APPLICATION

Please mail check and completed application to:

Attn: Kim Schiller
 247 Sarah Wells Trail
 Campbell Hall, NY 10916

Annual Membership Fee: \$40.00 *Please make checks payable to HHHRA*
(Fee includes family members living under same household)

Member(s) Information: *Should you need additional lines or space, please use additional sheets of paper*

Listing	Member Name(s) <i>All club information will be sent attn to Primary Member only</i>	Relationship to Primary Member <i>Spouse, son, daughter, etc.</i>
1. Primary Member		
2. Add'l Family Member		
3. Add'l Family Member		
4. Add'l Family Member		
5. Add'l Family Member		

Contact Information:

Street Address: _____

City: _____ State: _____ Zip: _____

Home#: _____
(Please include area code)

Mobile#: _____
(Please include area code)

Fax#: _____
(Please include area code)

Email: _____
(If Email is provide, all correspondence will be made electronically)

Listing	Dog Name(s) – list applicable titles, if any <i>(should you need additional lines or space, please use additional sheets of paper)</i>	Birth Date
1.		
2.		
3.		
4.		
5.		

I hereby subscribe to the purposes of the Hudson Highlands Hunting Retriever Association, Inc. and apply for membership.

***Primary Member (1) Signature: _____ Date: _____
 Add'l Family Member (2) Signature: _____ Date: _____
 Add'l Family Member (3) Signature: _____ Date: _____
 Add'l Family Member (4) Signature: _____ Date: _____
 Add'l Family Member (5) Signature: _____ Date: _____

How did you hear of HHHRA? Online/Web Ducks Unlimited Other _____
 HHHRA member referral *(please provide name(s))* _____

Are you a member of NAHRA? Yes No If yes, please provide NAHRA #: _____

I am interested in the following areas: Training sessions Field Trials Hunt Tests
 Other _____

As a member of HHHRA, I will work or help out with HHHRA sponsored events? Yes No

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