

UKC[®] CLUB OFFICER CHANGE/UPDATE FORM

UKC CLUB OFFICERS: Please list the current officers on file with UKC as well as the newly elected/appointed officers in the appropriate sections below. This form MUST be returned to UKC regardless if there have been any officer changes. UKC will verify and update our files with any changes indicated below.

Club Name: ____

Club ID: ____

_____ Date of Election: ____

PLEASE NOTE: Both the current officer(s) as well as the newly elected officer(s) MUST sign this form. If the same person retains the same officer position then only one signature is required. If officer positions have changed or an individual who is newly elected is on this form, all signatures are required. Please note that a single person may not fill all officer positions. There must be more than two officers listed. The corresponding officer is the person designated by the club to receive all official documentation from United Kennel Club. This includes Event Applications and Club Newsletters. Please name one club officer to be listed on the UKC website as the Club Contact. This person's name, email, and phone number will be posted. If left blank, the Corresponding Officer will be listed as the Club Contact.

NAME OF CLUB CONTACT: _____

CURRENT OFFICERS

PRESIDENT	TREASURER
Name:	Name:
Address:	Address:
City, State/Prov., Postal Code:	City, State/Prov., Postal Code:
Phone:	Phone:
Email:	Email:
Signature of Acceptance:	Signature of Acceptance:
VICE PRESIDENT	CORRESPONDING OFFICER
Name:	Name:
Address:	Address:
City, State/Prov., Postal Code:	City, State/Prov., Postal Code:
Phone:	Phone:
Email:	Email:
Signature of Acceptance:	Signature of Acceptance:
SECRETARY	
Name:	
Address:	
City, State/Prov., Postal Code:	
Phone:	
Email:	
Signature of Acceptance:	

NEWLY-ELECTED OFFICERS

PRESIDENT	TREASURER	
Name:	Name:	
Address:	Address:	
City, State/Prov., Postal Code:	City, State/Prov., Postal Code:	
Phone:	Phone:	
Email:	Email:	
Signature of Acceptance:	Signature of Acceptance:	
VICE PRESIDENT	CORRESPONDING OFFICER	
Name:	Name:	
Address:	Address:	
City, State/Prov., Postal Code:	City, State/Prov., Postal Code:	
Phone:	Phone:	
Email:	Email:	
Signature of Acceptance:	Signature of Acceptance:	
SECRETARY		
Name:		
Address:		
City, State/Prov., Postal Code:		
Phone:		
Email:		
Signature of Acceptance:		