



**** CALL TO MODDF NATIONAL SCRATCH ****

On behalf of the National Hide of the Military Order of the Devil Dog Fleas I welcome all fleas to our National Scratch on Wednesday, August 5, 2009 at the Kahler Grand Hotel in Rochester, MN

Our Initiation Team is hard at work to make this another fun Scratch. Since we are across the street from the Mayo Clinic we feel it necessary for the Flea Eggs, Crawlers and advancing Dogs to have "medical" attention and a work up from the renowned team of the Flea Medical University. What better time to dress up as doctors and nurses? Come in scrubs, uniforms, lab jackets, etc. but this is not necessary to participate in the fun and frolic.

We will be having a Best Nurse Cap Contest, Display your creativity in good taste. The members present will vote and a prize will be awarded.

Preregistration for the Initiates will begin Sunday, August 2nd from 2:00 to 5:00 PM (coincides with the MODD registration). If you are arriving Monday or Tuesday, ask to see a member of the Flea Registration Team to receive your assignments. In addition registration hours will be announced. The initiate having the highest monetary amount in sales will receive a prize.

National Fleas don't forget your passports, collar and flea pin. It will help if you bring your current flea card and Auxiliary Membership Card. Dues are \$2.00 per year. If you are in arrears, you may catch up and dues for the year ending 2010 will be collected. Marine Williams, PNBF, will be present with items to purchase from the Flea Ship Store. The more money we make the more the individuals may donate to their favorite veteran oriented charity.

Looking forward to seeing you and Semper Mordendi,
Alice Blackford, National Big Flea

Military Order of Devil Dog Fleas
Application for Initiation

Name in Full _____

Address _____ City, State, Zip+4 _____

Email address _____ Phone _____

I am a member in good standing of the _____ Hide
Affiliated with the _____ Unit Department of _____

I am a nit crawler and want to be become a crawler flea at the _____ Flea
Scratch
(Circle One) (Circle One) (Local, State, or National)

Date of Application _____ Signature _____

Accepted by _____ Date _____
(Scratchy Flea) email address _____

Date of Initiations: _____

Initiating Officer _____ email address _____
(Scrappy Flea)

1 copy for applicant and 1 copy to each Scratchy Flea, (if applicable) Local, State and National