

Renewals Are Due 1st July of each Year

**WHITE SWISS SHEPHERD DOG CLUB
OF AUSTRALIA INC**
(Affiliated with the Australian National Kennel Council INC)



Office Use - Year:

Receipt Number:

NEW MEMBERSHIP FORM 2017/18

New Membership

Family/Dual	\$25.00
Single	\$15.00
Concession	\$10.00

Nominated by: _____ Signature of Nominator: _____
(Name in Block Letters) Nominator must be a financial member of the WSSDCA INC.

Kennel Name: _____

I/We wish to accept membership of the White Swiss Shepherd Dog Club of Australia INC

I/We agree to abide by the Clubs' Code of Ethics, Rules and By Laws. (Available on the Club Website)

I/We hereby give permission for photos of the below named and/or our dos taken at WSSDCA events or supplied by myself, to be used by the WSSDCA and its associated bodies, or the purpose of promotion & advancement of the Club and dogs, in a manner of club's choosing, for an unspecified period of time.

Signature: _____ Date: / /

Signature: _____ Date: / /

Membership is pro rata from April.

Mr/Mrs/Ms/Miss Surname: _____ First Name/s: _____

Mr/Mrs/Ms/Miss Surname: _____ First Name/s: _____

Mast/Ms/Miss Surname: _____ First Name/s: _____

Mast/Ms/Miss Surname: _____ First Name/s: _____

Canine Association Membership No. (if applic): _____ Prefix (if applic): _____

Canine Association Membership No. (if applic): _____

Membership Category: _____ Student/Pensioner No. if applic.: _____

Postal Address: _____

Email Address: _____ Postcode: _____

Email Address: _____

Phone (Home): _____ Phone (Work): _____ (Mobile): _____

My interest is Showing Breeding Obedience/Agility
 Pet Other (Specify) _____

Please send completed form to **Secretary:** secretary.wssdca@gmail.com

Once your membership is approved at the next Committee meeting, you will be contacted to arrange payment by Direct Bank Deposit, Cheque/Money Order

Please note: Membership year is from 1 July to 30 June of the following year.

Office Use: 2017/18 _____

Resigned Date: _____