

Cocker Spaniel Club of the ACT Inc.

Application for Membership

I/We
Wish to Join/Renew , my/our membership of the Cocker Spaniel Club of the ACT inc.
Address:
Phone Number: ()
Email:@
(Newsletters will be sent via email) Breed/s Owned
Membership of the Cocker Spaniel Club of the ACT Inc is open to owners of registered Cocker Spaniel and members of their families. New Members please give details of your dog to enable full membership to be granted.
Dogs Name:
Registration Number Breed
I/We agree to abide by the Constitution and Regulations or By-Laws as shall be in force from time to time. I/We have read and agree to abide by the Code of Ethics of The Cocker Spaniel Club of ACT Inc. I am/We are the registered owner/part owner of a registered Cocker Spaniel or a member of a household, one of whom is the owner/part owner of a registered Cocker Spaniel.
Signed: Date:
Membership Type Dual/Family \$12.00 Single \$10.00
Annual subscription (1 st July to 30 th June) is attached
Cash Cheque Postal Order Draft (Aust. currency)
Amount enclosed - \$
Please forward this form with your remittance immediately to The Treasurer 500 Boxers Creek Pd

Towrang NSW 2580