

EASTERN SUBURBS DOG TRAINING CLUB INC

Registered Address: PO Box 6, RANDWICK, NSW 2031

APPLICATION FOR MEMBERSHIP

I hereby apply to be admitted as a Member of Eastern Suburbs Dog Training Club Inc. ('the Club')

I agree to observe, perform and in all respects conform with and be bound by the Constitution, Regulations and Ground Rules of the Club.

I agree to pay a membership subscription, as per the Constitution, due and payable on or before the 1st July of each year.

I understand that the Club is an affiliate of The Royal N.S.W. Canine Council ('the Council'). As a member of the Club, I agree to be bound by the Rules and Regulations of the Council and at all times to submit to and carry out every Council determination, finding, decision, requirement or direction that relates to me.

I certify that my dog has been fully immunised against Distemper, Hepatitis and Parvovirus.

CONDITIONS OF MEMBERSHIP AND RENEWAL

I acknowledge that I will be accepted as a member of the Club on the following terms and conditions:-

- 1) The Club will not accept any responsibility and shall not be liable for any:
 - a) loss of; or
 - b) damage to goods belonging to the member, notwithstanding any negligence on the part of the Club or any member of the Club.
- 2) Members of the Committee reserve the right to ask any member to leave the training ground, if they consider that member to be:
 - a) acting improperly or
 - b) refusing to obey the instructions or directions of any Committee Member or Instructor.
- 3) Any member who sustains an injury whilst attending the training sessions shall indemnify the Club against liability, notwithstanding the negligent act of a fellow member.
- 4) The owner or handler of a dog bears sole responsibility for any actions and for the results of any actions by that dog.

PLEASE USE BLOCK LETTERS

TITLE:- MR / MRS / MISS / MS / MASTER

DOG'S NAME AS USED IN TRAINING:-

SURNAME:-

.....

FIRST NAME:-

BREED OF DOG:-

ADDRESS:-

DOG'S AGE:- SEX:- DOG / BITCH

..... POSTCODE:-

PHONE NO:-

EMAIL ADDRESS:-

MEMBERSHIP TYPE:- JUNIOR (12 to 17yrs) / ADULT / DUAL

ARE YOU A MEMBER OF DOGS NSW? YES / NO

IF YES, MEMBERSHIP #:-

OFFICE USE ONLY

Joining & Membership:- \$

Equipment:- \$ = \$

Vaccination Certificate:- YES / NO

Club Official:-

I have read and accept the above Application for Membership and Conditions of Membership Renewal. I understand that my name and image and that of my dog/s may appear in the Club newsletter and on the Club website:-

SIGNATURE:-

DATE:-