

Eastern Suburbs Dog Training Club Inc.

MEMBERSHIP RENEWAL FORM – 2011

Your Club's financial year ends on 30th June 2011. Failure to pay your subscription **ON OR BEFORE 30TH JUNE 2011** will terminate your membership, **UNLESS** you joined on or after 1st May 2011. Please complete the form, listing the information requested and any changes in your personal details or the dogs you currently own etc.

SUBSCRIPTION FEES:	ADULT (18 years & over)	\$10.00
	JUNIOR (12 to 17 years)	\$ 7.00

In order that the health and safety of all Members' dogs on the Training Grounds can be ensured, a **CURRENT VACCINATION CERTIFICATE** for all dogs owned **MUST** be viewed by a member of the Executive Committee OR a photocopy sent if renewing by mail.

CHEQUES AND MONEY ORDERS TO BE MADE PAYABLE TO:
EASTERN SUBURBS DOG TRAINING CLUB INC.

PAYMENT MAY BE MADE AS FOLLOWS:

- BY MAIL:** Complete this form together with your cheque (*No Cash to be sent through Mail*) to: Club Secretary, ESDTC, PO Box 6, Randwick 2031. You must enclose photocopy of current vaccination certificate(s). If a receipt is required, please include a stamped, self-addressed envelope.
- AT THE TRAINING GROUND** (no receipts issued)

(Please print)

NAME: _____

ADDRESS: _____

POST CODE: _____ TEL NO: _____

EMAIL ADDRESS (uppercase please): _____

MEMBERSHIP RENEWAL TYPE (please circle): JUNIOR (12 to 17 years) / ADULT

I enclose CHEQUE/ MONEY ORDER for \$_____ and a copy of a current vaccination certificate/s.

1st Dog's Name (as used in training): _____ Breed: _____

Current Obedience Class at Training (e.g. Class 1 etc): _____

2nd Dog's Name (as used in training): _____ Breed: _____

Current Obedience Class at Training (e.g. Class 1 etc): _____

I wish to renew my membership of the Eastern Suburbs Dog Training Club Inc for the period 1st July 2011 to 30th June 2012 and I agree to be bound by the Club's Constitution and Rules. I understand that my name and image and that of my dog/s may appear in the Club newsletter and online in the Club website and social media pages.

SIGNATURE: _____

DATE: _____

Vaccination certificate/s sighted: Yes / No

Club Official: _____