

# METROPOLITAN MID-WEEK DOG TRAINING CLUB Inc.



(Affiliated with Dogs NSW)

## APPLICATION FOR MEMBERSHIP

NEW MEMBER

MEMBERSHIP RENEWAL

I/We hereby apply to be admitted as Member/s of the Metropolitan Mid-Week Dog Training Club and in consideration of your acceptance of my/our application and admission as a Member. I/We hereby agree to observe and perform and in all respects, to conform and be bound by the Constitution and the Regulations for the time being of the Club.

I/We agree to pay the Member subscription as per the scale below, which is due 1<sup>st</sup> July each year.

- |   |   |
|---|---|
| <input type="checkbox"/> Single Membership <b>\$25</b>  | <input type="checkbox"/> Dual membership <b>\$30</b>    |
| <input type="checkbox"/> Initial Joining Fee <b>\$25</b>  | <input type="checkbox"/> Tracking <b>\$15</b>           |
| <input type="checkbox"/> Weekly ground fees <b>\$5</b>  | <input type="checkbox"/> Pensioner discount <b>\$10</b> |
| <input type="checkbox"/> Beginners 4-Week Course (Includes Joining Fee, Membership & 4 Ground Fees) <b>\$85</b> |   |

OR:

- |  |  |
|--|--|
| <input type="checkbox"/> 12-monthly <b>General</b> Membership <b>\$200</b><br>(includes Renewal & Ground Fees) | <input type="checkbox"/> 12-monthly <b>Instructors</b> Membership <b>\$120</b><br>(includes Renewal & Ground Fees) |
|--|--|

Is your dog currently vaccinated against:  Hepatitis  Distemper  
 Parvovirus  Kennel Cough

(Office Use: Vaccination Certificate sighted by – please initial \_\_\_\_\_)

I/We indemnify the Club against any claim for damages for personal injury, however caused.

(Please print)

(Mr/Mrs/Ms) Surname \_\_\_\_\_ Given Name \_\_\_\_\_

ADDRESS \_\_\_\_\_

SUBURB \_\_\_\_\_ POSTCODE \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

Are you a member of Dogs NSW?  Yes  No \* If yes, Membership Number:

Is your dog registered with Dogs NSW?  Yes  No \_\_\_\_\_

BREED \_\_\_\_\_ PET NAME/s \_\_\_\_\_

SEX \_\_\_\_\_ D.O.B. \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_ Class \_\_\_\_\_

MMWDTC Inc. Postal Address: The Secretary, MMWDTC, Box 3055 18 Moore Avenue, WEST LINDFIELD, NSW 2070

How would you like to receive your PawsAwhile Magazine?

- EMAIL PawsAwhile Magazine: Email address \_\_\_\_\_  
 I will COLLECT PawsAwhile Magazine  
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