

# APPLICATION FOR MEMBERSHIP



Reg. No: A0023882W  
ABN 97 452 215 878  
Locked Bag K9 Cranbourne  
Victoria 3977  
t: (03) 9788 2500  
f: (03) 9788 2599  
e: office@dogsvictoria.org.au  
www.dogsvictoria.org.au

TITLE (Mr Mrs Miss Ms Mstr) and SURNAME		GIVEN NAMES	
RESIDENTIAL ADDRESS (must be stated)		SUBURB or TOWN	POSTCODE
POSTAL ADDRESS (if different from residential address)		SUBURB or TOWN	POSTCODE
TELEPHONE (HOME)	(MOBILE)	EMAIL	
TELEPHONE (BUSINESS)		OCCUPATION (optional)	

## CATEGORY OF MEMBERSHIP APPLIED FOR

(tick one square only)  
See reverse for definition of categories and rates

ORDINARY       DUAL       JUNIOR       ASSOCIATE (Interstate only)       AGED PENSIONER (card copy with application)

DATE OF BIRTH (Junior Members Only)	SIGNATURE of Parent/Guardian of Junior Member	Parent/Guardian's DOGS Victoria Member No.
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A full copy of the DOGS Victoria Constitution, Rule & Regulations and the Code of Ethics and Code of Practice are available from [www.dogsvictoria.org.au](http://www.dogsvictoria.org.au)

**I/We agree to be bound by the constitution, Rules & Regulations of DOGS Victoria and the Code of Ethics and Codes of Practice.**

Signature..... Date.....

DUAL MEMBERSHIP ONLY. Please complete details of second member below.

NAME IN FULL (GIVEN NAMES, THEN SURNAME)	MEMBERSHIP NUMBER
RESIDENTIAL ADDRESS	SIGNATURE

OFFICE USE ONLY
INITIALS: _____ DATE: _____

**PLEASE SEE BACK OF FORM FOR PRICES AND DEFINITION OF MEMBERSHIP CATEGORIES**

**2.6 CATEGORIES OF MEMBERSHIP**

The membership of DOGS Victoria shall consist of:

- 2.6.1 Ordinary membership, being a natural person of at least 18 years of age and resident of the State of Victoria.
- 2.6.2 Dual membership, being two natural persons who each qualify as an ordinary member, and who are residents at the same address.
- 2.6.3 Life membership as provided for in Rule 2.9.
- 2.6.4 Junior Membership as provided for Regulations. (list date of birth)
- 2.6.6 Associate membership, being a natural person residing outside the State of Victoria and a member of an ANKC recognised canine controlling body.
- 2.6.7 Transitional Provisions. Members who held non voting syndicate or kennel membership prior to the April 2004 AGM may, at their option continue that membership.

**TO OBTAIN AGED PENSIONER/DUAL RATES A COPY OF PENSION CARD MUST BE SUPPLIED.**

**For further clarification of membership application or fee structure contact the office on listed number.**

**MEMBERSHIP FEES**

(Strike out the items not required).

<b>JOINING FEE</b> (not required for junior Members)	30.00
<b>MEMBERSHIP FEE</b> (full 12 months)	
<b>ORDINARY or ASSOCIATE</b>	73.50
<b>DUAL</b>	109.90
<b>AGED PENSIONER RATE</b> (not Health Care Card holder)	62.00
<b>DUAL AGED PENSIONER RATE</b>	98.70
<b>JUNIOR</b> (full 12 months)	46.70
<b>JUNIOR</b> (only if Gazette is delivered to same address)	16.80

**ADD TRANSFER OF DOG** (enclose original Pedigree if transfer is required) 27.00

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**TOTAL FEES ENCLOSED** **\$**

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<b>CHECK LIST</b>	
To assist with the processing of your membership please check the following:	
Membership Form	<input type="checkbox"/>
Original Pedigree for transfer	<input type="checkbox"/>
Aged Pension Card (photocopy)	<input type="checkbox"/>
Appropriate fees	<input type="checkbox"/>

Referred by: (please specify)	
Breeder	<input type="checkbox"/>
Family/Friend	<input type="checkbox"/>
Website	<input type="checkbox"/>
Other	<input type="checkbox"/>

Please pay by cheque, money order or if you pay by credit card, please complete the details below.

**PAYMENT BY CREDIT CARD**

Card Type:  Visa  Mastercard

Card holder's name (print):.....

Amount paid \$.....

Card expiry date:..... /..... /.....

Signature:.....

Office use only
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