GERMAN SHEPHERD DOG CLUB OF QUEENSLAND INC.

MEMBERSHIP APPLICATION FORM

I/We……

Address……

……Postcode……

Phone……Mobile……

Email……

I/We wish to apply for membership of the German Shepherd Dog Club of Queensland Inc and enclose my/our cheque/money order (**do not enclose cash**).

I/We undertake to abide by all the rules and regulations presently in force and subsequently enacted, of the Constitution of the German Shepherd Dog Club of Qld Incorporated.

(Signature1) …… (Signature 2) ……

PROPOSER: ……
Print name (must be a financial member of the GSDCQ)

Signature: ……

SECONDER: ……
Print name (must be a financial member of the GSDCQ)

Signature: ……

(This membership form is invalid if not signed by all parties)

(A) MEMBERSHIP CATEGORY: WITH THE NATIONAL REVIEW (4 copies a year)
From the 1st October to 30th September (please circle)

Double or Single	$70.00 AUD (Overseas postage contact the Secretary)
Junior (up to age of 16 years)	FREE (does not include Fidelity or Review)

(B) HALF YEARLY MEMBERSHIP INCLUDES 2 NATIONAL REVIEWS
From 1st April to 30th September (please circle)

Double or Single	$35.00 AUD (Overseas postage contact the Secretary)
Junior (up to age of 16 years)	FREE (does not include Fidelity or Review)

ALL CHEQUES/MONEY ORDERS TO BE MADE PAYABLE TO:
THE GERMAN SHEPHERD DOG CLUB OF QUEENSLAND INC

Send to:
GSDCQ Secretary, Diane Ballantyne
16 Luscombe Crescent
Wolffdene QLD 4207
Email secretary@gsdcqld.org.au

OR USE THE CREDIT CARD OPTION BELOW

PLEASE COMPLETE, SCAN AND EMAIL BOTH PAGES TO

secretary@gsdcqld.org.au

GERMAN SHEPHERD DOG CLUB OF QLD CREDIT CARD PAYMENTS

Mastercard ☐ Visa ☐ (tick box)

CARD No _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ CARD EXPIRY DATE _ _ / _ _

AMOUNT $ CARDHOLDER'S PHONE No

_____

CARDHOLDER'S SIGNATURE _____

DATE _____/_____/20_____