



MEMBERSHIP APPLICATION FORM

Name(s):

Address:

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Postcode: Tel (Home):

Mobile: Email:

KCAffix (if applicable):

PROPOSED BY (Name):

How long have you known this applicant? In what capacity?

How long have you been a member of SNC? Are you a member of any other club?

Why do you think this person is suitable to join SNC

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Signature:

SECONDED BY (Name): Signature

NEW MEMBER TO COMPLETE

- 1. Please indicate that your details may be published in all Club literature Yes No
- 2. Please indicate acceptance for your details to be stored on Club database Yes No

MEMBERSHIP FEES

Please indicate appropriate category by ticking box

- Full Single Membership..... £20.00
- Full Joint Membership..... £25.00
- Junior Membership (Under 18 years of age/date of birth.....)..... £5.00

How long have you owned Newfoundlands?

How many do you currently own? Main interests in the breed

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What are your expectations from SNC?

I would like to receive the following information (Please tick the appropriate box[es]):

- Agenda/Minutes/Newsletter Post Email
- Show Schedules Post Email
- Water/Draught Post Email

I / We enclose a cheque/cash made payable to 'The Southern Newfoundland Club'. Please send the completed application with payment to The Hon Secretary at the address below. **Membership subscriptions are due by 31st December 2011.**

By signing this application I / we agree to continue to be bound by the SNCs Code of Practice and Constitution (available on request):

Signature(s): Date: