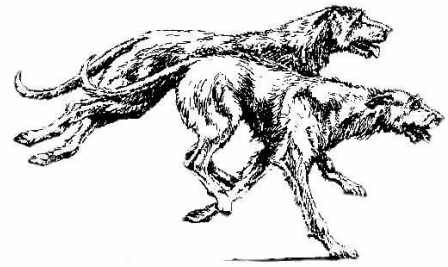


Irish Wolfhound Club of Victoria Inc.

Affiliated with Victorian Canine Association Inc. [A0028643M]



Membership Application/Renewal Form

1 July 2024 to 30 June 2025

Name(s):

Address:

Email Address

Phone: BH/AH (.....) Mobile

Please note that Club correspondence, including the quarterly Club Magazine “CU” is emailed out to members.

In the event of my/our admission as a member(s) of the Irish Wolfhound Club of Victoria Inc, I/we agree to be bound and by the Rules, Regulations, By-laws and Code of Ethics of the Irish Wolfhound Club of Victoria Inc., and the Constitution, Rules and Regulations of the Victorian Canine Association Inc. for the duration of my/our membership. In the event of a litter being bred by me/us, I/ we agree to verify the parentage of the litter through DNA testing of the dam, sire and puppies, and to have the litter tested for Porto –Systemic Shunt (PSS).

Note: If you are undergoing financial hardship in relation to payment of renewal of fees, please contact the Club Secretary to discuss.

Signature/s:

Please Circle Category of Membership you are Applying/Paying for:	Single	Dual/Family /Syndicate	Amount Due
<i>Joining Fee (New members only, one off payment) Plus choose one of the options below which apply to you</i>	\$18.00	\$18.00	
<i>Victorian Resident, Non VCA* Member</i> • <i>Includes compulsory VCA* insurance levy</i>	\$33.00	\$50.00	
<i>Victorian Resident & VCA* Member</i> • <i>Compulsory insurance covered by VCA* membership fees</i> • <i>VCA* Membership Number _____</i> <i>(must be quoted to obtain discounted rate)</i>	\$25.00	\$30.00	
<i>Non-Victorian Australian Resident</i>	\$25.00	\$30.00	
<i>Overseas Resident</i>	\$36.00	\$36.00	
TOTAL			\$

*VCA = Victorian Canine Association, trading as Dogs Victoria

Payment Method: (please tick)

Bank Transfer: BSB: 063-891 Account Number: 1008-1524 IRISH WOLFHOOUND CLUB OF VIC INCORP
Please include your Surname in the Reference field to enable reconciliation of funds received

Date Funds Transferred:

Cheque: Please make payable to: “Irish Wolfhound Club of Victoria Inc.”, and send with application form

Credit Card: Mastercard Visa

For the amount of \$ Exp: ___/___ CCV: ___ ___ ___

Cardholders' Name:Signature:

Please forward completed and signed application to:

K. O'BRIEN (SECRETARY) 42 MOLESWORTH STREET, GLENLYON, VICTORIA 3461
or email a scanned copy to kathrynobrien23@hotmail.com

Applications for membership received and accepted after 1 April 2024 will remain valid until 30 June 2025.
Renewal applications are due 30 June each year. Applications received after 1 August will be considered as lapsed/new memberships and the New Members Joining Fee will apply.

Committee Use Only:

Date Form Received	Date Funds Received	Date Accepted by Committee	Signed Secretary