Dogs Queensland Renewal For 2020



DOGS QUEENSLAND PO BOX 1136, MT OMMANEY QLD 4074 PHONE (07) 3252 2661, FAX (07) 3252 3864

Email: info@dogsqueensland.org.au, Website: www.dogsqueensland.org.au

- 1) <u>MEMBERS:</u> To renew your membership complete this form in full and return it, together with your fees to Dogs Queensland before 31 December 2019. If fees are not paid by the second day after the Annual General Meeting, to be held in March 2020, a joining fee may be imposed and an application for (new) Membership may be required. It is ESSENTIAL to list your residential address (if different from Postal Address). NOTE If you have moved address, proof of your new residential address MUST be attached to this form e.g. utilities bill or both sides of your driver's licence.
- 2) <u>JOINT TO SINGLE:</u> If you wish to change from a Joint Membership to a Single Membership, this renewal application must be accompanied by a letter from the other member stating that he / she is no longer interested in a joint membership and that they have no objection to the joint membership being closed. If you also wish to transfer your prefix, which may require a transfer of your breeding bitches, please contact the Dogs Queensland office for additional information.
- 3) <u>SINGLE TO JOINT:</u> If you wish to change from Single to Joint Membership with a person who resides at the same address, please contact Dogs Queensland for the correct form and fees.

Single: □

Joint:

Membership Details:

Membership Number:

Phone (H/M): Residential Address: Post Cod Postal Address if different: Member 2 Title: Surname: Given Name: DOB: Phone (H/M): Residential Address: Residential Address: Residential Address: Suburb/Town: Post Cod Post Cod Suburb/Town: Post Cod Post	e:	
Postal Address if different: Member 2 Title: Phone (H/M): Residential Address: Post Cod Suburb/Town: Suburb/Town: Suburb/Town: Post Cod Postal Address if different: Suburb/Town: Post Cod Suburb/Town: Post Cod	e:	
Member 2 Title: Surname: Given Name: DOB: Phone (H/M): Email Address: Suburb/Town: Post Cod Residential Address if different: Suburb/Town: Post Cod		
Phone (H/M): Email Address: Residential Address: Suburb/Town: Post Cod Postal Address if different: Suburb/Town: Post Cod	e:	
Residential Address: Suburb/Town: Post Cod Postal Address if different: Suburb/Town: Post Cod	e:	
Postal Address if different: Suburb/Town: Post Cod	e:	
	e:	
Prefix Name: QLD Local Govt Area: (Council Name) Contact Details for QLD Local Govt (Your Contact Phone or email address one only)	;	
Junior Members (Junior Members must be linked to one of the above Members):		
Membership Number:Surname:Given Name:DOB:	DOB:	

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Membership Requirements/Fees:

Requirement	Fee:	Member 1:	Member 2:	
Single Membership	\$75.00			
Joint Membership (Two (2) People Residing at the Same Address)	\$115.00			
Life Member Spouse	\$44.00			CREDIT CARD PAYMENT DETAILS
Breeder's Prefix Maintenance (Per Prefix: Must Be Paid Yearly)	\$49.00 ea.			MASTERCARD VISA CARD (TICK ONE BOX)
Conformation Judges Renewal (covers all disciplines except Dog Sports & RAFT)	\$100.00			MEMBERSHIP No.: NAME ON CARD:
Dog Sport & RAFT Judges Renewal	\$60.00			
Handler Judges	\$0.00			CARD No.: CARD EXPIRY DATE: /
Dog World Magazine 2020 (Cost of Postage Only) *	\$20.00			AMOUNT: \$ CARDHOLDER'S PHONE No.:
Total	\$.00		CARDHOLDER'S SIGNATURE: DATE: / / 20
*Dog World Magazine – Please only select if you specifically requi http://www.dogsqueensland.org.au/members-area/?id=3515	ire a hard copy of	the Magazine	e posted to yo	u. The magazine can be viewed online at
(for Members and/or Breeders, whichever is applicable), all available from	embership, I/we und the Dogs Queenslan nent (Protecting Pup	ertake to obser d Website or of	ve and be boundifice and declare	d by Dogs Queensland's Rules, Code of Ethics, Code of Conduct and Codes of Practice that I/we are not suspended or disqualified members of any Controlling body. I/We endment Act 2016(the Act), will be provided to the Queensland State Government in
\square I certify that I am capable of judging in accordance with the Rules and in	the usually accepte	d manner.		
\square I wish to receive a hard copy of my 2020 Membership Card.				
X		X		
Member 1 Signature:		Member	r 2 Signature	
Date:	1 1			Date: / /