

Bullmastiff Club of Queensland

2012 MEMBERSHIP FORM

CATEGORIES OF MEMBERSHIP: SUBSCRIPTION

(TICK THE APPROPRIATE BOX AND CIRCLE THE APPROPRIATE STATUS)

- | | | |
|--------------------------|--------------------------------------|----------|
| <input type="checkbox"/> | DUAL (RENEWAL / NEW) | \$ 30.00 |
| <input type="checkbox"/> | SINGLE (RENEWAL / NEW) | \$ 25.00 |
| <input type="checkbox"/> | NEW PUPPY (ANNUAL MEMBERSHIP) | \$ 15.00 |
| <input type="checkbox"/> | OVERSEAS (RENEWAL / NEW) | \$ 40.00 |



PLEASE SEND THE COMPLETED FORM AND PAYMENT TO:

Bullmastiff Club of Qld
23-25 Flaxton Court
NINGI, QLD 4511

Surname: **First Name:**

Address:

..... **Post code:**.....

Telephone: Home: **Mobile:**

Email Address:

Kennel Prefix:

Financial member of the CCCQ (or applicable state body): YES NO

I/we enclose a cheque payable to: **The Bullmastiff Club of Qld** for the amount of \$.....

NOTE: "period of membership" in relation to a member, denotes the twelve months terminating midnight on the 31st October each year.

I/we hereby apply for **membership/renewal of membership** and if accepted by the first available general meeting, will abide by the Code of Ethics and the Constitution used by the club (Constitution of Unincorporated Affiliates of the Canine Control Council of Qld). I/we declare that I am/we are not under suspension by any Australian controlling body or other Affiliate. Membership will only be accepted with the completed membership form with remittance by cheque or money order. (Please note no discount applies to Renewal or New Membership should the membership be accepted as quarterly, half yearly or otherwise).

Signed: Dated:/...../.....

Nominating Member: Dated:/...../.....