



Membership Form

Name(s): _____

CAWA Membership Number(s): _____

Address: _____

Postcode: _____ Phone Number: _____ Mobile: _____

Kennel Name/Prefix: _____ Email: _____

Breed/s: _____

Membership Type		
	New	Renewal
Single \$15		
Double \$15		

Areas of Interest	
Conformation	
Retrieving	
Field Trials	
Obedience	
Other (please specify)	

Amount Enclosed: \$ _____

*Please make cheques payable to The Gundog Club of WA (Inc)

Please send to: The Treasurer
 Lot 216 Passmore Street,
 Southern River, WA, 6110

**Or Bank Transfer to Gundog Club of WA (Inc) BSB: 066 108 Account Number: 0090 3006

I/We hereby apply for membership and agree to be bound by -
"The Gundog Club of WA (Inc) Rules and Regulations".

Applicant Signature(s)

Date