



Application for Membership to WAAG Agility Dog Club Inc.

Annual Membership Valid from July 1st until June 30th.

If applying after April 1st then membership is valid till June 30th the following year.

Type of Membership Application *(please tick the appropriate box)*

- Individual Membership**
\$25. Full voting rights.
- Dual Membership** for two people from the same household.
\$40. Both members have full voting rights.
Please fill in a separate membership form for each member and submit both forms together with the dual fee.
- Family Membership** for unlimited members from the same household.
\$50. All members over 18 have full voting rights.
Please fill in a separate membership form for each member and submit all forms together with the family fee.
- Junior Membership** for those 10 years and under 18 years of age.
\$15. No voting rights. Please have a parent or guardian sign the membership form.
- Concessional Membership** for people on a pension.
\$15. Full voting rights.

Member Details

- I am a renewing member of WAAG **or** I am a new member of WAAG

About Me

Name: _____

Address: _____

_____ Postcode: _____

Home Phone: _____ Mobile Number: _____

Email: _____

- Please add me to the WAAG-agility email discussion list at Yahoo groups.

About My Dogs

First Dog's Name: _____

Dog's Date of Birth: / / Or estimated age if DOB is unknown: _____

Breed or Cross: _____

Council Registration Number: _____

Date of last Vaccination: / / I have attached a copy of my dog's latest vaccination certificate

Second Dog's Name: _____

Dog's Date of Birth: / / Or estimated age if DOB is unknown: _____

Breed or Cross: _____

Council Registration Number: _____

Date of last Vaccination: / / I have attached a copy of my dog's latest vaccination certificate

Third Dog's Name: _____

Dog's Date of Birth: / / Or estimated age if DOB is unknown: _____

Breed or Cross: _____

Council Registration Number: _____

Date of last Vaccination: / / I have attached a copy of my dog's latest vaccination certificate**What I agree to as a member of WAAG**

- I have read the WAAG ground rules and agree to abide by these rules.
- I understand that WAAG offers no refunds on membership fees.
- I understand that participating in agility requires helping to set up and pack up the agility equipment.
- I apply for membership to Wild About Agility GoldCoast- Agility Dog Club Inc (WAAG - ADC Inc). In the event of membership admission, I agree to be bound by the Memorandum and Articles of Association and Regulations of WAAG - ADC Inc. for the time being in force.

Signature: _____ Date: / /

Guardian's signature if under 18: _____

Office Use

Date Received: / / Initials:

- Received Payment
- Verified Membership
- Verified Vaccination
- Receipted Payment

Secretary: Entered in Membership database Initials: