***DUSTON GERMAN SHEPHERD DOG TRAINING CLUB***

***MEMBERSHIP APPLICATION FORM***

***I wish to apply for Membership of the Duston German Shepherd Dog Training Club and agree to abide by the rules.***

***NAME:***

***ADDRESS:***

***POST CODE: E-MAIL:***

***TELEPHONE No: OCCUPATION:***

***DOG’S NAME: AGE:***

***DOG’S NAME: AGE:***

***VACCINATION DATE: MICRO CHIP NO:***

***SIGNATURE:***

***INTAKE CLASS: DATE RECEIVED:***

***8 weeks @ £5.00: DATE RECEIVED***

***FULL MEMBERSHIP: DATE RECEIVED:***

***BANK REF:***

***NAME:***

***DUSTON GERMAN SHEPHERD DOG TRAINING CLUB***

***RECEIPT***

***RECEIVED WITH THANKS: INTAKE DATE:***

***RECEIVED WITH THANKS: 8wks DATE:***

***RECEIVED WITH THANKS: MEMBERSHIP: DATE:***