



BELCONNEN DOG OBEDIENCE CLUB

2017 – 2018 Volunteer Membership Renewal

All membership renewals are due by 31 July 2017

BDOC MEMBERSHIP DETAILS Please print all details

Surname: First Name:

Other Names in Family Membership:

Address: Postcode:

Phone Number:

E-mail Address:

Have your contact details changed since last year? Yes No

DOG DETAILS Please tick each activity that you undertake.

Dog's Name	Canine Companion	Agility	DWD	Flyball	Obedience Trialling	Rally Obedience	Grounds Use Only
Volunteer's Annual Membership Fee for 2017 – 2018							\$30
I would like to make a donation to BDOC to support my involvement in activities							\$
TOTAL FEES DUE							\$

The Belconnen Dog Obedience Club collects your personal information to establish and maintain your membership to the Club, and to provide you with newsletters and other information about the Club activities as required. Your personal information will not be used for any other purpose without first seeking your consent, unless the Club is authorised or required to do so by law. By completing and submitting this form, you consent to the collection of all personal information contained on this form, including the personal information of other individuals in your household.

I understand that the Belconnen Dog Obedience Club accepts no responsibility for any injury to persons or dogs, property loss or damage on the Club's grounds. I declare that my dog(s) are adequately vaccinated against hepatitis, distemper and parvovirus (C3) or titre tested to show satisfactory immunity, and I agree to abide by the rules of the Club.

Signed: Date:

SUBMITTING YOUR MEMBERSHIP RENEWAL

Cheques and money orders should be made payable to Belconnen Dog Obedience Club Inc.

In Person

Visit the BDOC Office:
Thursdays (7:00 to 8:30pm) or
Sundays (9:00 to 10:30am)

Pay by: cheque, money order, credit card, EFTPOS, and cash

By Post

PO BOX 879, MITCHELL, ACT
2911

Pay by: cheque, money order

Online

Email your completed form and a copy of the bank transfer receipt to
applications@bdoc.asn.au

Pay by direct bank transfer
BSB: 062 911
Account: 10139225

FOR OFFICE USE ONLY

Member is eligible for the volunteer rate: Yes No

Receipt No: Receipt Date: In person By mail By email

Amount Paid: Payment Method: Cash Cheque Credit card Debit (EFTPOS) Bank transfer