

THE SHIH TZU CLUB OF VICTORIA INC.

(A.C.N. 0026409L)

Affiliated with the Victorian Canine Association Inc.

Patron – The late Mrs Audrey Dadds (UK)



APPLICATION FOR MEMBERSHIP AND/OR RENEWAL FORM

I/We (full name/s)			
Address			
Phone		Mobile	
Email			
Prefix (if any)			
Registration number with Dogs Victoria or other Canine Association (if applicable):			

Membership Category (please tick)							
Full		Dual/Family		Associate		Junior	

- **Full Membership (\$40.00)** provides access to STCV play dates, health seminars, fun days, breed tutorials, breed mentor, puppy referral, reduced show entry fees, full voting rights and right to hold position on the STCV Committee if a member of a State controlling body.
- **Dual/Family Membership (\$50.00)** provides the same access as Full Membership but includes only one full voting right and one member can hold a position on the STCV Committee if they are a member of a State controlling body.
- **Associate Membership (\$32.00)** provides access to STCV play dates, health seminars, fun days, breed tutorials, breed mentor, but no voting rights.
- **Junior Membership (\$10.00)** provides members under the age of 16 the same access as Full Membership but no voting rights and unable to hold a position on the STCV Committee.

Membership Subscription runs 1st September to 31st August annually.

Form to be completed and posted together with remittance (cheque/money order) made payable to
"The Shih Tzu Club of Victoria Inc".

Please send to:

Maureen Schuyt, Secretary
 PO Box 558
 Brighton Vic 3186

Or pay via Direct Debt
BSB 033 135
Account No: 900592

and please include your **Name as Reference**

If my / our membership is approved, I / we agree to be bound by the Constitution, Rules & By-Laws of STCV, Dogs Victoria (or equivalent body in your state of residence) and Dogs Australia / ANKC for the time of being in force. I / we also agree that I / we may be contacted by STCV from time to time.

Signed		Signed	
Nominated by (name)		Signed	

For New members only:

If you do not have a person to nominate you, please still fill out and forward the application form.

OFFICE USE ONLY

Admitted to (category membership)		Effective Date	
-----------------------------------	--	----------------	--