

The Australian Shepherd Club of Ontario

MEMBERSHIP APPLICATION

New Member Renewal

Name (1): _____

Name (2): _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Kennel Name: _____

Phone No: _____ E-Mail: _____

Signature(s): (1) _____ (2) _____

By signing this application I (we) agree to abide by the Bylaws, regulations and Ethical Guidelines of this club and the Canadian Kennel Club. I (we) agree to hold the Members and Executive of the Australian Shepherd Club of Ontario harmless in any legality that may result during their tenures in office.

Dues:	Voting		Non-Voting	
Single	\$25.00	<input type="checkbox"/>	Single	\$20.00 <input type="checkbox"/>
Family	\$35.00	<input type="checkbox"/>	Family	\$25.00 <input type="checkbox"/>

Voting memberships for Ontario residents only

Voting Members are expected to respond to any mailed ballots and to attend the AGM or special meetings in order to achieve a quorum for the club.

Please complete and submit this form to: Cindy Haidon
1394 Brookfield Rd
Port Colborne, On L3K 5V3

Please make cheques payable to: **Australian Shepherd Club of Ontario**