SOUTHERN CAVALIER KING CHARLES SPANIEL CLUB (UK)

APPLICATION FOR MEMBERSHIP

NAME (Mr / Mrs / Ms / Dr) :_____ DATE: _____

ADDRESS:

_____

_____

_____

POST CODE: _____ TEL. NO: _____ PREFIX: _____

EMAIL: _____

I/We apply for single/joint/junior (under 18) membership and agree to be bound by the aims and rules of the Society.

I/We enclose subscription as follows: £10.00 Joint Subscription,
£7.50 Single Subscription

*All memberships are due for renewal on **1st January**, each year. Those joining after the 1st October are entitled to membership without paying a further subscription, for the whole of the following year.*

APPLICANT(S) SIGNATURE(S) : _____

PROPOSED BY: (PRINT): _____ *SIGNATURE:* _____

SECONDED BY: (PRINT): _____ *SIGNATURE:* _____

ALL PROPOSERS AND SECONDERS MUST BE MEMBERS OF THE SOUTHERN CAVALIER KING CHARLES SPANIEL CLUB

Please return to:

Hon. Treasurer
Mrs. J Phillips
182 Connaught Road
Brookwood
WOKING
Surrey
GU24 0AH
(01483 473685)

FOR S.C.K.C.S.C. USE ONLY:

Date received by Secretary:

Date elected to membership: