



# THE MALTA CANINE SOCIETY

## MEMBERSHIP APPLICATION FORM

PLEASE FILL IN WITH BLOCK LETTERS

SURNAME:							
FIRST NAME:						I.D CARD:	
JOINT'S NAME:						I.D CARD:	
ADDRESS:							
						POSTCODE:	
TEL (FIXED):				TEL (MOBILE):		D.O.B:	
EMAIL:							
BREEDS OWNED:							
AFFIX (KENNEL NAME)							
PROPOSER:						SIGNATURE:	
SECONDER:						SIGNATURE:	

If my application for membership is accepted, I shall abide by the Rules & Regulations of the Malta Canine Society. I also understand that my Membership application is subject to approval by the Committee, as stated in the Society's Rules & Regulations. If membership is not accepted, the membership fee paid will be reimbursed by the Society. The Committee is not obliged to give the reason for non-acceptance.

APPLICANT'S SIGNATURE:				DATE:			
JOINT'S SIGNATURE:							
DATA PROTECTION ACT: Please tick box if you do not want the Society to release data including your name, address and telephone numbers etc:							

Please send this form together with the relevant fee (see below) to cover period ending 31<sup>st</sup> December this year, to: The Secretary, The Malta Canine Society, 5, Camelia Street, Hamrun. HMR 1700. Membership is valid till the 31<sup>st</sup> December, irrelevant of the date it was paid for joining or renewal.

*Cheques must be payable to: The Malta Canine Society*

MEMBERSHIP FEES:	SINGLE: €19	FAMILY: €26	JUNIOR: €8	FOREIGN NATIONALS: €30
	One Adult member only	Mr & Mrs & children under 18yrs	10 – 17 years	Foreign/Overseas members

**For Office use only:**

Date received:								REFUSED	Membership No:				
Approved on:									Receipt No:				
Secretary's Signature:									Payment enclosed:				

I.D CARD NUMBERS must be included where indicated, otherwise **THE FORM WILL NOT BE PROCESSED**