



The Victorian Working Sheep Dog Association Inc

A0015093L ABN: 52 101 431 860

2018/2019 FORM OF APPLICATION FOR MEMBERSHIP

(AT TIME OF APPLICATION**) ALL NEW MEMBERS MUST BE NOMINATED & SECONDED BY CURRENT FULL MEMBERS OF THE ASSOCIATION (**)**

To the Secretary

I hereby apply to be a Member of the Victorian Working Sheep Dog Association Inc

| | |
|---|--|
| APPLICANTS NAME: (MR/MRS/MS/MISS) | |
| JUNIOR APPLICANT: DATE OF BIRTH/...../..... | |
| POSTAL ADDRESS | |
| POSTCODE | |
| TELEPHONE NO. | MOBILE |
| EMAIL | |
| I WILL BE WORKING DOGS AT TRIALS | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I WISH TO RECEIVE THE NEWS SHEET VIA EMAIL | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| NOMINATED BY | SIGNATURE OF NOMINATOR |
| SECONDED BY | SIGNATURE OF SECONDER |

I agree to abide by the

❖ Code of Conduct

- A member shall not inflict verbal or physical abuse on any person.
- A member shall not inflict pain nor cause wilful distress to any animal
- A member shall not engage in actions or dialogue which results in sexual harassment.
- A member shall not engage in unsportsmanlike conduct.
- A member must wear appropriate clothing and footwear when competing.
- A member must always present themselves for competition and/or official business in a state of sobriety.

Violation of the Code of Conduct

- Any complaint made under this Code must be received in writing by the Secretary of the Association within 7 days of the alleged breach
- That any Code of Conduct reports to be dealt with in accordance with Constitution Division 2 – Disciplinary action (Rules 19-24) or Division 3 Grievance procedure (Rules 25-29) as determined by Council

❖ Code of Ethics

❖ Rules of the VWSDA Inc

❖ VWSDA Constitution – 22 Jan 2014

and authorise the VWSDA Inc to provide my mailing details to affiliated clubs of the VWSDA & Interstate Working Sheep Dog Trials.

Council must ratify or revoke any application prior to membership privileges being exercised, as per the constitution, at its next scheduled general meeting

I am aware that my admission to Membership will be for the period of the current financial year and subscriptions are due and payable on the 1st day of July each year, or at such time as my Application is lodged. If membership fees are not paid by 30th September, the member will be taken to have resigned from the Association as per the Constitution. The Association's financial year shall commence on the first day of July each year and terminate on the 30th day of June the following year.

Signature: Date:/...../.....

©VWSDA – Membership Application 2018-2019

Page 1 of 2

Secretary: Mrs Diann Schrapel, P O Box 234, SEYMOUR VIC 3661 Tel: 03 5792 1089
Honorary Registrar: Mrs Kerry Dodge, 947 Smythesdale Rd, SNAKE VALLEY VIC 3351 Tel: 03 5344 9338



The Victorian Working Sheep Dog Association Inc
 A0015093L ABN: 52 101 431 860
2018/2019 FORM OF APPLICATION FOR MEMBERSHIP

I _____ wish to apply for the following membership level (please tick level)
 (Insert name)

- Full Membership Novice, Improver & Open Trial Competitors and/or Breeders \$95
 OR
 Full Membership (Pensioner) Novice, Improver & Open Trial Competitors and/or Breeders \$85
 OR
 Full Junior Membership Novice, Improver & Open Trial Competitors (under 18 years) \$35

PAYMENT METHOD (please tick method of payment)

- CHEQUE – payable to “The Victorian Working Sheep Dog Association Inc”
 MONEY ORDER - payable to “The Victorian Working Sheep Dog Association Inc”
 DIRECT DEPOSIT: date of DD / / 20.... **PLEASE DO NOT DD PRIOR TO 30 JUNE 2018**
- **BSB 083 894 Account Number 515170316, BANK/BRANCH: NAB, Shepparton Branch**
 - **Description: Membership Remitter Name: (your name)**

Please provide a receipt of funds transfer to schrapel1@activ8.net.au OR include a copy with membership application form

All members paying by Direct Deposit must still complete, sign and return Membership Application to Secretary
DO NOT SEND CASH THROUGH THE MAIL

Please forward Membership Application Form (both pages) together with payment (cheque or money order) of Membership Fee OR Direct Deposit details to:

The Secretary, VWSDA Inc, Diann Schrapel, P O Box 234, SEYMOUR VIC 3661

Membership is not valid until these forms are received and approved by the VWSDA Council

All dog registrations & transfers, prefix applications etc to be directed to Kerry Dodge, Registrar

FOR OFFICE USE ONLY

| DATE RECEIVED | PAYMENT TYPE | DRAWER | BANK | BSB/LOCATION | AMOUNT |
|---------------|----------------|------------------------------------|------|--------------|--------|
| | Cheque | | | | \$ |
| | Money Order | | | | \$ |
| | Direct Deposit | Date of DD / / 20..... | | | \$ |

COUNCIL APPROVAL OF MEMBERSHIP

| | |
|--|-------------------------|
| DATE OF COUNCIL APPROVAL OF APPLICATION | / / 20..... |
|--|-------------------------|

MEMBERSHIP REGISTER/ASDWA NOTIFICATION

| | |
|--|-------------------------|
| DATE ENTERED ON MEMBERSHIP REGISTER | / / 20..... |
| DATE ASDWA ADVISED | / / 20..... |

| | | | | | | |
|-----------------|-----------|-----------------------------------|-----------|----------------------------------|-----------|---|
| TRIALLER | YES NO | NEWS SHEET POSTAL LIST | YES NO | NEWS SHEET EMAIL LIST | YES NO | DATE ENTERED ON DISTRIBUTION LISTS / / 20..... |
|-----------------|-----------|-----------------------------------|-----------|----------------------------------|-----------|---|