



The Victorian Working Sheep Dog Association Inc

A0015093L ABN: 52 101 431 860

2019/2020 APPLICATION FOR MEMBERSHIP

(**AT TIME OF APPLICATION**)

NEW MEMBERS MUST BE NOMINATED & SECONDED BY CURRENT FULL MEMBERS OF VWSDA

To the Secretary

I hereby apply to be a Member of the Victorian Working Sheep Dog Association Inc for the 2019/2020 financial year

APPLICANTS NAME: (MR/MRS/MS/MISS)	
JUNIOR APPLICANT: DATE OF BIRTH/...../.....	
POSTAL ADDRESS:	SUBURB/TOWN: POSTCODE:
TELEPHONE NO.	MOBILE
EMAIL	
<input type="checkbox"/> I AGREE THAT THE VWSDA CAN DISCLOSE MY CONTACT DETAILS	
<input type="checkbox"/> I WILL BE WORKING DOGS AT TRIALS	
<input type="checkbox"/> I WISH TO RECEIVE THE NEWS SHEET VIA EMAIL	
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 – 13 February 2019**

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

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:/...../.....

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Secretary:	Mrs Diann Schrapel, P O Box 234, SEYMOUR VIC 3661	Tel: 0417 353 425
Honorary Registrar:	Mrs Kerry Dodge, 947 Smythesdale Rd, SNAKE VALLEY VIC 3351	Tel: 0407 449 338



The Victorian Working Sheep Dog Association Inc
A0015093L ABN: 52 101 431 860
2019/2020 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 2019**
- **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 (with copy of receipt of DD) 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 as per Constitution

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.....