



The Victorian Working Sheep Dog Association Inc

A0015093L ABN: 52 101 431 860

2023/2024 APPLICATION FOR MEMBERSHIP

(**AT TIME OF APPLICATION**)

To the Secretary

I hereby apply to be a Member of the Victorian Working Sheep Dog Association Inc for the 2023/2024 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 any 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 Louise Rielly, 70 Sommers Cres, KORUMBURRA VIC 3950 Tel: 0409 170 964
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
2023/2024 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
OR
 FAMILY MEMBERSHIP: Two Adults, Children under 16 \$190

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 2023**
- 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 louise.rielly@outlook.com 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, Louise Rielly, 70 Sommers Cres, Korumburra 3950

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..... |
|----------|-----------|---------------------------|-----------|--------------------------|-----------|---|
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