



THE WORKING KELPIE COUNCIL OF AUST INC.

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MEMBERSHIP APPLICATION FORM - Jan-Dec 2024

This is an interactive form. Save this form to your PC then close this online form and open the one you saved to your PC. You can then submit the form by printing the completed form and Fax it to the WKC.

_____ I hereby apply to be admitted as a member of the Working Kelpie Council of Aust. Inc. on the terms set out in the Constitution and agree to be bound by the Statement of Objects and Rules and any amendments made thereto.

_____ I agree to pay the Membership subscription which is due and payable on the first day of January in each year which includes an E-mailed copy of the News Bulletin.

Enclosed herewith is my/our Cheque / Money Order / Cash for the sum of \$

OR

Direct deposit: BSB 032 087, A/c No. 990591, A/c Working Kelpie Council of Aust. Inc. Include your name as a reference.

OR

Credit Card Type _____ Master Card _____ Visa _____ Amex

Name on Card: _____ Expiry date: ____/____

Card Number: _____

Name: _____ Signature _____

Address: _____

_____ Postcode: _____

Telephone : _____ Fax _____ Mobile: _____

E-mail Address _____ Website Address: _____

MEMBERSHIP *includes the monthly News Bulletins.*

* Membership <tick which applies>

Associate: _____ \$55.00 includes an emailed News Bulletin (for posted copy tick 'Yes' below)

Junior/Rural Youth: _____ \$35.00 includes an emailed News Bulletin (for posted copy tick 'Yes' below)

Overseas <Airmail>: _____ AUD\$70 includes an emailed News Bulletin (for posted copy tick 'Yes' below)

Unless particularly requested, receipts will not be posted out to members.

News Bulletin delivery by Post: Yes _____ I do not have an email address – no charge

News Bulletin delivery by Post: Yes _____ I would like a copy in addition to email – postage \$12 per year

BREEDERS:

If you are a breeder of Working strain Kelpies _____

AND/OR

If you wish to start a Registered Stud _____

AND/OR

If you are interested in the possibility of applying for a Breeder's Directory listing. _____

Please tick so that we can forward additional information and forms.

Print the completed form then sign it and Fax it to the WKC. Fax 02 9894 2140