



# THE MALTA CANINE SOCIETY

## MEMBERSHIP APPLICATION FORM

PLEASE FILL IN WITH BLOCK LETTERS

FIRST NAME:							
SURNAME:							
JOINT'S NAME:		I.D CARD:					
ADDRESS:							
						POSTCODE:	
TEL (FIXED):		TEL (MOBILE):		I.D CARD:			
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 December this year, to: The Secretary, The Malta Canine Society, 5, Camelia Street, Hamrun. HMR 1700.

*Cheques and Postal Orders must be payable to: The Malta Canine Society*

MEMBERSHIP FEES:	SINGLE : €19	FAMILY: €26	JUNIOR: €8.00	OVERSEAS: €26
	One Adult member only	Mr & Mrs & children under 18yrs	10 – 17 years	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**