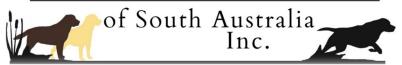
LABRADOR RETRIEVER CLUB



	<u>IVI</u>	embership Form 1st Octo	<u>ber 2025 - 30th September 2026</u>
Name:			
Residentia	l Address:		
Phone Nur	mber:		
Email:			
	1	Membership Type: Please	Tick the Required Membership
	<u> Single - \$25.00</u>		<u>Double - \$35.00</u>
	Pensioner (Single) - \$18.00		Pensioner (Double) - \$22.00
	Family (2 Adults, 2 Children) - \$40.00		Junior (No Voting Rights) - \$10.00
	(Children up	to age 18 and do not	
	have	voting rights)	
An applicat	ion for member	ship is tabled at the Club's	s Committee Meeting for consideration. Applicants will be
notified o	of the outcome.	ALL SECTIONS OF THIS FORM	M MUST BE COMPLETED FOR MEMBERSHIP CONSIDERATION.
My Interests and reasons for the membership are in the areas of Diago Tiels			
My Interests and reasons for the membership are in the areas of: Please Tick			
Dog Showing			Retrieving
Social Activities ar		and Networking	Other (Specify
How do you intend to support the club:			
Are you a registered ANKC Breeder: * Yes * No ANKC Member number:			
The you a registered further restriction for the first further further further for the first further f			
PAYMENT C	PTIONS		
DIRECT BANK TRANSFER: Labrador Retriever Club of SA Inc. BSB:105 071 ACC NO: 026674640			
DIRECT BAINT TRAINSPER:		(Please include your name in the transfer details)	
CHEQUE OR MONEY		Please email membership form and copy of payment to:	
ORDER ENCLOSED		Bev Jones: kirkdell@me.com	
ORDER ENCLOSED		Postal Details: post with copy of payment receipt or cheque to:	
		Bev Jones: PO Box 222 Kersbrook SA 5231	
		Dev.	JOHES. PO BOX 222 REISDIOOK 3A 3231
Members Si	gnature:		Date:
	<u>WEBSITE I</u>	LISTING IS INCLUDED FOR	MEMBERS OF MORE THAN 12 MONTHS
Kennel Prefix:			
Contact Name:			
Suburb:			
Phone Number:			
Fmail Address			