

# THE LEONFIELD WORKING SPANIEL CLUB

## MEMBERSHIP APPLICATION

NAME(S):.....

ADDRESS:.....

.....POSTCODE:.....

PHONE No: ..... MOBILE No:.....

EMAIL ADDRESS:.....

To help us to understand your ambitions for your dogs, please provide the following information:

<b>DOG 1</b> SPECIFIC BREED:..... NAME OF DOG:.....  KENNEL CLUB NAME(If registered)..... DATE OF BIRTH:.....  Do you intend to come to: Monthly Training Scheme?.....Working Tests?..... Field Trials?..... Work your dog?..... (PLEASE TICK)
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<b>DOG 2</b> SPECIFIC BREED:..... NAME OF DOG:.....  KENNEL CLUB NAME(If registered)..... DATE OF BIRTH:.....  Do you intend to come to: Monthly Training Scheme?.....Working Tests?..... Field Trials?..... Work your dog?..... (PLEASE TICK)
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**PAYABLE ON APPLICATION** Cheques payable to: **Leconfield Working Spaniel Club**

**JOINING FEE: £10 PLUS ANNUAL SUBSCRIPTION: ADULT £10 FAMILY £15 JUNIOR £5**

**Once your application has been accepted you will be sent a standing order form for future**

**annual subscriptions which are due on the 1<sup>st</sup> of April annually.**

I/We hereby apply for membership of the **Leconfield Working Spaniel Club** and fully agree to abide by the rules of the club and to participate in its mission to promote and improve the standard of training and working ability for all breeds of spaniel with the objective of enabling members to support the local shooting community with a high standard of spaniel work. I/We understand and agree that the details contained above will be held in electronic format in accordance with the Data Protection Act.

**I/We intend to work our dog(s) in the shooting field.**

Signature:..... Date:.....

**When you have completed this form please return it with your payment to the Membership Secretary:  
34 Lower Shott, Bookham, Leatherhead, Surrey, KT23 4NW.**

All applicants must be proposed and seconded by existing members of the club and print their names below.

<b>Proposed By:</b>  <b>Date:</b>	<b>Seconded By:</b>  <b>Date:</b>
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