

AXE VALE DOG TRAINING CLUB

APPLICATION FOR MEMBERSHIP

| Mr/Mrs/Miss/Ms * First Name Surname |
|-------------------------------------|
| Address |
| |
| Post Code |
| Telephone Number E-mail |
| |
| Name of Dog Breed |
| Sex Age Spayed/Neutered * |
| *Delete as applicable |

I hereby apply for membership of Axe Vale Dog Training Club and agree to abide by the Rules of the Club that I have been given. Membership is due for renewal on 1st May annually.

I understand that if I do not renew my membership by 1st June each year, I will need to re-apply for membership of the Club.

I confirm that my personal details may be held as part of the Club's records. I understand that this information will only be used to manage the Club's affairs, and to inform me about any of the Club's activities which I may find of interest. It will not be passed on to third parties without my express permission.

Record of my personal details will be removed from the Club's records one year after the termination of my membership.

I hereby agree to indemnify and hold harmless this Training Club, its members, committee and agents from any and all claims by me or any member of my family or any other person accompanying me to any training session or function of the Club or while on the grounds or the surrounding area thereto as a result of any action by any person or dog including my own.

| Signed | Date |
|-------------------------------------|------|
| Membership fee paid £ Membership Nu | mber |
| Signed | Date |
| Membership confirmed | Date |