



North Australian Canine Association (Inc)

Trading as **DOGS NT**

A member Body of the Australian National Kennel Council
 PO Box 37521, Winnellie NT 0821 Ph: 8984 3570 Fax: 8984 3409

Email: admin@dogsnt.com.au **website:** dogsnt.com.au

APPLICATION FOR MEMBERSHIP

Title/s	Surname/s	Christian Name/s	
Mr			
Residential Address (Must be Stated)		Suburb/Town	Postcode
Postal Address (If different from Above)		Suburb/Town	Postcode
Telephone Home		Telephone Business/Mobile	
Email Address:			

Proof of identity is required for all membership applications. Where an application for membership is NOT lodged in person a clear copy of one (1) form of photo identification for each person listed is to be attached to this application. Where the application IS lodged in person, the NACA Administrator will take copies of the identification. Where a person under 18 years does not have suitable identification, all details must be confirmed by an Adult with suitable identification.

Any form of official photo identification will be acceptable ie, Drivers licence, Passport, 18+ card etc, providing the Name and address listed on the identification match those on the application for membership.

Membership Type

Please check appropriate box

Ordinary Member	<input type="checkbox"/>	Joint Ordinary Member	<input type="checkbox"/>
Pensioner Member**	<input type="checkbox"/>	Joint Pensioner Member**	<input type="checkbox"/>
Junior Member*	<input type="checkbox"/>	Associate Member	<input type="checkbox"/>
Handler Member Junior*	<input type="checkbox"/>	Handler Member Senior	<input type="checkbox"/>
Date of Birth* (1)	(2)	optional unless under 18 years of age, then required	
Pension Card Number			

**** A copy of Pension Card (NOT Health Care Card) required**

I/We hereby apply for membership of the North Australian Canine Association. I/We certify that the information contained in the form above is true and correct and that I/We have read the Rules and the Code of Ethics of the North Australian Canine Association and that I/We agree to be bound by them for the duration of my/our membership. I/We further certify that we are not disqualified or suspended members of any other Canine Controlling body, nor are there any outstanding matters of any kind between myself/us and any other Canine Controlling body under this or any other name/s.

SIGNATURE (S): (1)

(2)

DATE:

(IF APPLYING FOR A JOINT MEMBERSHIP BOTH PARTIES MUST SIGN THIS APPLICATION)

Current prices for this application are available on our web site or from the office.