

**Application for Membership to
The Wellington Bulldog Club (Inc)**

Name: _____ No. of Dogs Owned: _____
Address: _____ French/British : _____
_____ Kennel Name: _____

Phone: _____ Show: Yes/No
E-mail: _____ Breed: Yes/No
May Show or Breed: Yes/No

I agree to abide by the Executive decision as to whether this Application is approved or declined, and to abide by the Rules of the Wellington Bulldog Club (Inc).

Signed: _____

Membership Fees:	Single	Family	Junior
Electronic Bullytyn	\$20.00	\$30.00	\$10.00
Hard Copy Bullytyn	\$30.00	\$35.00	\$15.00

(Cheques should be made payable to The Wellington Bulldog Club (Inc) or Online: 010504-0070862-00)

Send payment to: WBC Secretary
Sue Cameron
Pahaoa Station, RD4
MARTINBOROUGH 5784

For Office Use Only: Date Received: _____ Receipt Number: _____
