



The Golden Retriever Club of South Australia Inc.

Application for New Membership

Aged Care Volunteer Visitors Scheme – Caring Canine Companions Volunteer Visitor

NAME		
Title:	Name:	Surname:
ADDRESS:		
Postal Address:		
Suburb:		
State:	Post Code:	
Email Address: <i>(Print Clearly)</i>		
Phone Number:	Mobile:	
Breed of Dog:	Dog's Name:	
Do you wish to receive the Golden Retriever Club Newsletter "The Golden Era"? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Do you breed Golden Retrievers? Yes <input type="checkbox"/> No <input type="checkbox"/>		
I hereby apply for Membership of the GRCSA Inc and agree to abide by the Constitution, Code of Ethics and By-Laws of the GRCSA Inc and the Code of Ethics of Dogs SA. I also agree to be party only to honourable dealings which will reflect favourably on the breed and the Club.		
I hereby declare that I agree to the GRCSA membership terms and the information provided is true and correct. Any wilful dishonesty may render for refusal of this application.		Date:
No GRCSA membership fee is payable upon being accepted as an ACVVS-CCC volunteer visitor. Please return this form to: Caring Canine Companions PO Box 186 WELLAND SA 5007 Or via Email: caringcaninecompanions@hotmail.com		
<i>Office Use Only</i>		
ACVVS Coordinator: Daniela Pesavento		Date:
I hereby declare that I have received and reviewed this membership application for CCC.		
<input type="checkbox"/> Treasurer	<input type="checkbox"/> Caring Canine Companions Administration	
<input type="checkbox"/> Membership Officer	<input type="checkbox"/> Newsletter Editor if required	

