



**APPLICATION FOR MEMBERSHIP**

DATE OF APPLICATION.....  
NAME/S.....  
ADDRESS.....  
.....  
POST CODE.....  
Tel. No.....  
\*E-MAIL ADDRESS.....

Name of Keeshond

ANNUAL SUBSCRIPTIONS (1st January - 31st December)			
SINGLE	£	9.00	£.....
JOINT	£	13.00	£.....
Young Member (aged 16 - 21 years living at the family address)	£	5.00	£.....
Child (under 16 with no voting right)	£	1.00	£.....
	TOTAL		£.....

Please pay by electronic payment giving your name as reference – eg Smith/Subs to:  
North of England Keeshond Club : HSBC : sort code 40-37-37 : a/c no. 61367633

**I / WE AGREE TO ABIDE BY THE RULES OF THE NORTH OF ENGLAND KEESHOND CLUB**

**\*All of your Club correspondence will be sent electronically apart from the magazine.**

(MEMBERSHIP WILL BE CONFIRMED IN WRITING SUBJECT TO ACCEPTANCE BY THE COMMITTEE)

SIGNATURE OF APPLICANT/S .....

APPLICANTS MUST BE PROPOSED AND SECONDED BY A CURRENT MEMBER OF THE CLUB

PROPOSED BY..... SIGNATURE .....

SECONDED BY..... SIGNATURE .....

**COMPLETED APPLICATION FORM TO BE SENT OR EMAILED TO:**

**THE HON. TREASURER: ANJI MARFLEET**  
**12 ASPEN COURT, EMLEY, NR HUDDERSFIELD, W. YORKS. HD8 9RW Tel : 01924 840315**  
**email:treasurer@north-of-england-keeshond-club.co.uk**

[www.north-of-england-keeshond-club.co.uk](http://www.north-of-england-keeshond-club.co.uk)  
[www.keeshondhealthmatters.co.uk](http://www.keeshondhealthmatters.co.uk)