

DOGS NSW

APPLICATION FOR ASSOCIATE AFFILIATION AGRICULTURAL SOCIETIES/ASSOCIATIONS

**Business Address:**

The Bill Spilstead Complex for Canine Affairs
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Postal Address:

PO Box 632, St. Marys NSW 1790

Website: www.dogsnsw.org.au

Email: info@dogsnsw.org.au

NAME OF SOCIETY/ASSOCIATION _____

SECRETARY _____ ADDRESS _____

PCODE _____ TEL: _____

DOG SECTION ORGANISER _____

ADDRESS _____

PCODE _____ TEL: _____

EMAIL ADDRESS _____

The Board of Directors may admit as an Associate Affiliate of DOGS NSW

- an agricultural society or other like body which has constituted a dog section show committee for the purpose of conducting a dog show for exhibition of pure bred dogs at its annual show;

PROVIDED THAT the Board of Directors is satisfied that:

- its secretary is experienced in the organisation and running of a show; and
- such organisation or dog section committee has members thereof who are experienced in the conduct of dog shows; and
- it will provide sufficient show rings for the conduct of its dog show which will meet the requirements and standard approved by the Board of Directors from time to time; and
- it will provide facilities for exhibitors of the standards required by and approved of by the Board of Directors.

Applicants are requested to address the above issues as part of the application to assist the Board of Directors in its consideration of the application

The Board of Directors may charge such entrance fee and such annual subscription for affiliation as the Board of Directors may from time to time determine and pending and subject to such Determination an Associate Affiliate shall pay such annual subscription in advance in respect of the Financial Year. The annual subscription shall be payable on the first day in July each year, and if an Associate Affiliate shall fail to pay such subscriptions prior to the first day of August each year it shall not be entitled until otherwise determined by the Board of Directors to any of the privileges to which an Associate Affiliate is entitled under the Constitution and the Regulations, but shall be subject to all obligations imposed upon an Associate Affiliate provided that when affiliation commences during the currency of a Financial Year the Associate Affiliate shall pay the subscription in respect of that year upon admission as such Affiliate.

Signature: _____

(Secretary)

Date: _____

This application **MUST** be accompanied by the **AFFILIATION FEE OF \$150.00** and a copy of your Society/Association's Certificate of Currency for Public Liability and Workers Compensation Insurance.