

MEMBERSHIP RENEWAL FORM 2018



Thank you for your continued interest in the Japanese Akita Inu Club, your support is greatly appreciated and we look forward to working with you during the following year.

I/We the undersigned wish to renew my/our membership of the Japanese Akita Inu Club and agree to abide by the Rules. I/We will endeavour to place the welfare of the Japanese Akita Inu above all else.

The JAIC fully supports the Kennel Club's General Code of Ethics which can be viewed through the link from our website www.japaneseakita-inu.co.uk or directly from the KC website www.thekennelclub.org.uk/item/247

Member	Name (Block Capitals)	Over 16	Signature
		Y/N	
1
2
3

Main email address (Please print as used):

If joint membership and you would prefer emails to be sent to individual addresses please list overleaf.

Address:

Postcode: **Tel No:**

Kennel Affix: **Website:**

Date:

Annual Subscription enclosed: £ (£10.00 single/joint* £15.00 family**)

*A couple or 2 people in joint ownership of a dog. ** Up to 3 people at the same address plus any children under 16. Please add details of other under 16 members on the back of this form)
Only members over the age of 16 have voting rights. Any member attending and voting at Annual General Meetings or Special General Meetings of this Club must have been a member in good standing for not less than one full year following the AGM subsequent to their membership being approved.

Please return this form with cheque/postal order payable to JAIC to:

Ms Sue Buckley, JAIC Membership Secretary, 13 Chichester Close, Ilkeston, Derbyshire. DE7 5EW
Or pay by **Paypal** to: paypal@japaneseakita-inu.co.uk.

Paypal Reference:

RECEIPT REQUIRED YES/NO

Secretarial Use Only

Date Received: **Subscription enclosed:**

Membership Year: 01 January to 31 December 2018

Please use this side to enter details of children (under 16) that you wish to include in your family membership. The date of birth is required to calculate when the individual becomes eligible for voting rights.

Member	Name (Block Capitals)	<16 Y/N	Date of Birth (if under 16)	Signature
4				
5				
6				
7				
8				
9				
10				

Other email addresses

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