



AGILITY DOG ASSOCIATION OF AUSTRALIA LTD

ABN 83 070 415 404

REQUEST FOR MEMBERSHIP CHANGE

The applicant/member has read and understands the refund policy which is available at http://www.adaa.com.au/_policies/POL-FIN-13-Refund-Policy-080124.pdf and by signing and lodging the form, the applicant/member agrees with and is bound by the refund policy.

MEMBERSHIP CHANGE TYPE

- Address / Phone / Email Change - no charge
- Add a new member(s) to your current Membership - \$10.00 per new member (see page 2)
Number of Members to Add:..... Total Cost:\$.....
- Remove a member(s) from your current Membership - \$10.00 per member removed (see page 3)
Number of Members to Remove:..... Total Cost:\$.....

Details Change

MEMBERSHIP No(s) (required).....

Previous Details:

PHONE: day night mobile

Email Address(s):

POSTAL ADDRESS Line 1:

POSTAL ADDRESS Line 2:

TOWN/SUBURB: STATE: POST CODE:

New Details:

PHONE: day night mobile

Email Address(s):

POSTAL ADDRESS Line 1:

POSTAL ADDRESS Line 2:

TOWN/SUBURB: STATE: POST CODE:

Any other information (eg, name change, extra email contacts etc):.....

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.....

Signature(s):.....

Add New Member(s)

MEMBERSHIP No (required):.....

POSTAL ADDRESS Line 1:

POSTAL ADDRESS Line 2:

TOWN/SUBURB:STATE: POST CODE:

TITLE:..... **SURNAME:** **FIRST NAME:**

PHONE: day night mobile

Email Address(s):

DOB (if Junior member): / /

TITLE:..... **SURNAME:** **FIRST NAME:**

PHONE: day night mobile

Email Address(s):

DOB (if Junior member): / /

TITLE:..... **SURNAME:** **FIRST NAME:**

PHONE: day night mobile

Email Address(s):

DOB (if Junior member): / /

TITLE:..... **SURNAME:** **FIRST NAME:**

PHONE: day night mobile

Email Address(s):

DOB (if Junior member): / /

I/We hereby apply for membership/renewal to the Agility Dog Association of Australia Ltd ABN 83 070 415 404 (ADAA). In the event of membership admission:

I/We agree to be bound by the Memorandum and Articles of Association and Regulations of ADAA for the time being in force.

I/We have not been convicted of an offence under any legislation relating to cruelty to animals.

Signatures for New Member Units.

SIGNATURE:DATED:

SIGNATURE:DATED:

SIGNATURE:DATED:

SIGNATURE:DATED:

Remove Member(s)

Note: The member(s) removed will need to re-join ADAA to continue participating in ADAA events / competitions.

Membership Address (required):

POSTAL ADDRESS Line 1:

POSTAL ADDRESS Line 2:

TOWN/SUBURB:STATE: POST CODE:

Remove **MEMBERSHIP No** (required):

TITLE:..... **SURNAME:** **FIRST NAME:**

PHONE: day night mobile

Email Address(s):

SIGNATURE: **DATED:**

Remove **MEMBERSHIP No** (required):

TITLE:..... **SURNAME:** **FIRST NAME:**

PHONE: day night mobile

Email Address(s):

SIGNATURE: **DATED:**

Remove **MEMBERSHIP No** (required):

TITLE:..... **SURNAME:** **FIRST NAME:**

PHONE: day night mobile

Email Address(s):

SIGNATURE: **DATED:**

Remove **MEMBERSHIP No** (required):

TITLE:..... **SURNAME:** **FIRST NAME:**

PHONE: day night mobile

Email Address(s):

SIGNATURE: **DATED:**

Please allow 14 days for processing of Membership Changes. Any enquiries should be made a minimum of 21 days after despatch of form and payment. Cheques/Money Orders should be made payable to: **ADAA LTD.** Membership Change Form along with Cheques/Money Orders should be sent to:

**THE SECRETARY
AGILITY DOG ASSOCIATION OF AUSTRALIA LTD
PO Box 2212
Gailes Qld 4300**