

## THE ENGLISH SETTER ASSOCIATION OF VICTORIA INC

(Reg No: A 0014498 L)

## Application for Membership

Applicant's Full Nai	me:	<del></del>
Address:		
		Postcode:
Phone:	Email:	
Laws of the Associa		as a member, I agree to be bound by the Rules and By- at as a condition of membership I am obliged to low, if I breed.
Signature of Applic	ant:	Date:
Ι,		per of the Association, nominate the applicant bership of the Association.
Signature of Propo	ser:	Date:
	y to membership category being applied fo embership \$25       Dual membership	
NOTE: The Victorian Canine Association imposes an insurance levy on Victorian members ONLY who are NOT members of the VCA. Single \$8.65 OR family \$17.30. This does not apply for other states.  Applications for membership of the ESAV Inc are subject to approval by the Committee of Management to complete the membership process.  TOTAL AMOUNT TO BE PAID: \$		
payment details.	O - englishsettervic.treasurer@gmail.co Please note your membership application	om – an invoice will be forwarded on receipt with will only be accepted on receipt of payment.
Enquiries to the to	reasurer J Kakos, (Phone: 0413 862 010).	
	The ENGLISH SETTER ASSOCIATION CODE OF PRACTICE - I	
	nembership, each member, upon application for wing breeding practices:	r admission or renewal of membership of the Club, shall
	eed primarily to improve the breed. ke responsible action to reduce the incidence	of hereditary diseases.
•	e obtained prior to breeding.  must be provided on request to prospective p	ouppy purchasers.
	Ifness AER hearing tested prior to breeding. (BAER 'b ust be provided on request to prospective pup	
	enquiries to member/breeders and ask that the of Practice if member/breeders do not comp	ey supply the information as above. It will be seen as a ly.
For office use or	nly: Date Application received:  Date Invoice sent:	Date payment received: Accepted by committee: