

COTSWOLD AND WYEVERN LABRADOR RETRIEVER CLUB

Application Form for New Members

I/We wish to apply for Membership of the above Club.

Name:

Address:

.....

.....

Post Code: Tel No:

Affix (if any):

Proposed by: Signed:

Seconded by: Signed:

(Proposer and Seconder must be fully paid up Members of the Club)

Signature of Applicant: Date:

Signature of Applicant: Date:

Please indicate main interest: * Showing Working Both

- Please delete

Annual Subscription: Single £6.00 Joint £8.00

Please return to Ms. Carolyn Jenkins, 1 Target Close, Ledbury, Herefordshire
HR8 2LR