SOFT-COATED WHEATEN TERRIER ASSOCIATION OF CANADA INC. WWW.SCWTAC.COM

2020 SCWTAC Associate Membership

New Members Application



BY SUBMITTING YOUR MEMBERSHIP FEES YOU AGREE TO FOLLOW THE SCWTAC'S CODE OF ETHICS.



New option for your copy of *Wags*!

I would like to receive a **PDF version only** (no printed hard copy).

INSTRUCTIONS

Please choose one of the **Associate** memberships below.

Associate Members in good standing for a minimum of one calendar year are eligible to apply for Regular Membership.

New members can join anytime. Memberships Renewals are due **January 1.**

	\$30 - Sin	gle ASS	OCIATE	Mem	bership i	for 20	020
One	member –	receives	Wheaten	Waas.	May NOT	vote,	nomina [.]

One member – receives Wheaten Wags. May **NOT** vote, nominate or hold office.

\$35 - Dual (household) ASSOCIATE Membership for 2020

Two members in one household – receives one copy of *Wheaten Wags*. May **NOT** vote, nominate or hold office.

I am giving \$ as a Donation to support Wheaten Health,							
Wheaten Rescue, etc. Donations are acknowledged, receipts are not							
issued. I want to direct my donation specifically to							

PAYMENT METHODS

Canadian resident fees shall be in Canadian dollars; all others submit fees in US dollars.

CHEQUES/and CLUB MAIL

Make cheque payable to the "SCWTAC" and forward to: Lana Campbell 68 Hawk's Landing Drive, Priddis Greens AB TOL 1W3.

E-TRANSFER - NEW!

Canadian residents may now pay by e-transfer to **scwtacclub@gmail.com**. Use code word: **membershipdues.**

PAYMENT SUBMITTED

Membership Fee \$_____

Donation \$_____

TOTAL \$

HOW TO SUBMIT THIS APPLICATION Submit this PDF by email to **lana.campbell68@gmail.com** or print and mail to Lana Campbell, 68 Hawk's Landing Drive, Priddis Greens AB TOL 1W3.

NAME(S)	Please email Lana Campbell at <u>lana.camp-bell68@gmail.com</u> if you are interested in			
ADDRESSCITY				
PROV/STATE POSTAL/ZIP	COUNTRY	participating in club activities.		
PHONE(S)		COMMITTEES: Fundraising, Constitution, Nom-		
E-MAIL	inating, Judges' Education, Health, Specialty/			
WEB		Booster Guidelines, Specify Others:		
YEAR YOU FIRST OWNED A SCWT	YEAR JOINED SCWTAC			
IF YOU ARE A SCWT BREEDER:				
REG'D KENNEL NAME:	ACTIVITIES: Conformation, Obedience, Agility,			
		Rally, Breeding, Barn Hunt, Dock Diving.		
YOUR SIGNATURE(S)	Specify Others:			
(ELECTRONIC OR TYPED SIGNATURES WILL	BE ACCEPTED IF SUBMITTING VIA PDF)			

SCWTAC use only - CKC Membership(s) #

DATE OF APPLICATION