## **WODONGA DOG RESCUE INCORPORATED**

## **APPLICATION FOR MEMBERSHIP**

I			
(name)			
of			
(address	<del>;</del> )		
(phone)	(ema	il)	
desire to become a men	nber of WODONGA DOG R	ESCUE INCORPORATED.	
In the event of my admis time being in force.	ssion as a member, I agree to	be bound by the rules of the Association	ı for the
Signature of Applicant		 Date	
l(name)		a member of the Association	١,
	or membership of the Associa	tion.	
Signature of Proposer		 Date	
l( <i>name</i> )		a member of the Association	ı, second
,	oplicant for membership of the	Association.	
Signat	ure of Seconder	 	

Please fill out this form and return to a Wodonga Dog Rescue Committee Member or email to: secretary@wodongadogrescue.org.au or post to: PO Box 807, Wodonga, Vic 3689

\*Please fill out all areas of the form. If required, WDR can arrange for a nominator and seconder.