



THE AUSTRALIAN WORKING BORDER COLLIE REGISTRY INC

INC9896908

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APPLICATION FOR MEMBERSHIP/RENEWAL OF MEMBERSHIP WITH THE AUSTRALIAN WORKING BORDER COLLIE REGISTRY

2025 - 2026 financial year

NAME:

ADDRESS:

TOWN:STATE:POSTCODE.....

TEL..... MOBILE:..... FAX.....

EMAIL.....

IS THIS A NEW MEMBERSHIP OR A RENEWAL MEMBERSHIP NO: (IF KNOWN)

DO YOU OWN/REGISTERING, OR ARE YOU PURCHASING AN AWBCR REGISTERED DOG: NO YES

IF NO, WHY ARE YOU APPLYING FOR MEMBERSHIP?

DO YOU GIVE AUTHORITY TO PUBLISH: NO YES

DO YOU WANT TO REGISTER A PREFIX: NO YES

If yes please nominate your prefix here:

Prefix must be approved by the Registrar before being used & can ONLY be used with purebred Border Collies, you will be notified by email of outcome.

I(Applicants Name) do hereby agree to abide by ALL the rules set out by the Australian Working Border Collie Registry.

Dated.....

NEW MEMBERSHIP	Cost \$20	\$
REGISTER A PREFIX	Cost \$10	\$
MEMBERSHIP RENEWAL	Cost \$10	\$
LATE MEMBERSHIP RENEWAL <i>IF NOT RENEWED BY THE 31ST DECEMBER</i>	Cost \$20	\$

TOTAL \$

Direct Deposits – PLEASE use your surname or Membership Number as Reference

BSB: 032653

Account: 270653

Australian Working Border Collie Registry

Please note scanned and emailed copies will be accepted.

Please email to treasurerawbcr@gmail.com

(Office use only) Date Received _____ Ref No _____