



Membership Form/ Renewal

NAME (Mr/Mrs/Ms/Miss)

ADDRESS.....
.....
.....

POST CODE..... TELEPHONE NO.....

AFFIX..... Date

Please tick one of the following: -

- | | |
|----------------------|---------|
| UK SINGLE | £ 7.00 |
| UK JOINT | £ 9.00 |
| UK OAP SINGLE | £ 4.50 |
| UK OAP JOINT | £ 7.00 |
| UK JUNIOR (under 16) | £ 1.50 |
| OVERSEAS | £ 12.00 |

Total enclosed: £.....

Method of payment Cheque / Cash

I/WE WISH TO BECOME A MEMBER(S) OF /RENEW MEMBERSHIP WITH THE MIDLAND
OLD ENGLISH SHEEPDOG CLUB

Signed.....

**MEMBERSHIP IS ACCEPTED SUBJECT TO APPROVAL BY THE COMMITTEE AT ITS NEXT
MEETING**

Data Protection Act 1998

If you have any objection to the above details on this form being retained on computer for
preparation of labels for distributing club material, please sign in the space provided below.

(.....)

**PLEASE MAKE CHEQUES PAYABLE TO THE MIDLAND OLD ENGLISH SHEEPDOG CLUB
(MOES CLUB) AND RETURN FORM TO:**

**DR SARAH WINSON. HILTON HOUSE. GREAT WYRLEY, STAFFORDSHIRE, WS6 6DS
Tel: 01922 410611**