

*Please use Block Capitals*

|  |  |
| --- | --- |
| **Applicant’s Name** |  |
| **Postal Address** |  |
| **Email Address** (essential \*) |  |
| **Mobile Phone Number** (optional) |  |
| **Date** |  |

***\**** *AGM notification, membership renewal reminders & ezines*

*shall be sent by email to the above address.*

**Please list your interests in Pugs:**

|  |  |
| --- | --- |
|  | Yes / No |
| I own a pet pug(s) |  |
| I show pugs |  |
| I want to start showing pugs |  |
| I show other breeds & wish to learn about pugs |  |
| I breed pugs |  |
| Other (please state) |  |

**Proposed & Seconded**

Applications must be proposed and seconded by fully paid up members of the Club.

If you do not have a Proposer & Seconder, please leave this section blank.

|  |  |
| --- | --- |
| Proposed By |  |
| Proposer’s Signature |  |

|  |  |
| --- | --- |
| Seconded By |  |
| Seconder’s Signature |  |

**I wish to become a member of the Irish Pug Dog Club and declare as follows:**

1. I have read the Rules of the Irish Pug Dog Club. I agree to abide by the rules of the Club and by the decision of the Committee in all matters within their control (jurisdiction).
2. I have read the Ethics of the Irish Pug Dog Club and I agree to abide by them.
3. I hereby give my consent for my details to be retained by the Irish Pug Dog Club
4. I enclose my subscription (€6) for one year (from AGM to AGM).

|  |  |
| --- | --- |
| Signature |  |
| Date |  |

Please return the completed form to:

Gillian Stewart,

Secretary, Irish Pug Dog Club,

Garryowen,

Killacloran,

Aughrim, Co. Wicklow

*Applications are considered at Committee meetings of the Club and the Committee reserve the right to refuse membership, without stating the reason for doing so.*

*GDPR: The Irish Pug Dog Club shall only use your personal information for the reason for which it has been supplied, and shall not provide it to a third person without your permission or unless obligated to do so as a legal requirement.*