**Capital Country Cavy Club Inc. Membership Form**

**If you live in the:**

 **ACT, Queanbeyan**

 **Regional NSW, Southern Highlands**

 **or south of Picton**

 **you’ll want to join the**

 **Capital Country Cavy Club**

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Name/s:…………………………………………………………………………………………………………………………………………………….

Please use BLOCK letters (Please include ALL names if applying for Double/Partnership Membership)

 Stud Name/s (ANCC registered only): ..........................................................................................................

Address: ...........................................................................................................................Post Code……………

Phone no./s: ..................................................Email: ………………………………………………………………………………….

Your breed/s: .................................................................................................................................................

 Please tick if you want these details on the CCCC Inc. website Breeders’ Directory.

 I/we hereby agree to abide by the Rules of the Capital Country Cavy Club Inc and understand the committee reserves the right to refuse any membership. .

…………………………………………………………………………………………………………………………………………………………………

Signature/s Date

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| **Capital Country Cavy Inc. Club Membership Fees** |
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| PAYMENT: Please send completed form with correct payment (CHEQUE) or DIRECT DEPOSIT RECEIPT to the Secretary. CHEQUE: Payable to: Capital Country Cavy Club Inc. (CCCC Inc.). DIRECT DEPOSIT: BSB 062-593 Account No. 1048 6766 Commonwealth Bank. | **New Membership** OR **Renewal**   |
| **Single ($35)** | $ |
| **Double/Partnership/Family ($45)** | $ |
| The Secretary, CCCC Inc. Mikaela Piper PO Box 59Bungandore  Enquiries: cccavyclubsecretary@gmail.com **Membership renewals due 31 August.** | **Please note:** Membership includes online colour version of the cavy newsletter.  | **Stud Ad – A free service for Members. Contact Editor.** |  |
| **Donation (thank you)** | $ |
|  |  |
| **TOTAL ENCLOSED**  | $ |

DIRECT DEPOSIT. Receipt attached If direct deposit is used, a copy of the receipt must accompany the Membership Form. Please use YOUR NAME as the reference.

 CHEQUE. Payable to CCCC Inc.