



APPLICATION FORM

New Member **Current member**

Name(s): _____

Address: _____

PostalCode: _____

City: _____

Telephone: (____) _____

E-Mail: _____

(We use e-mail to send members info regarding events etc. We do not give/sell e-mail addresses.)

Pets names and breeds:

Would you prefer to receive your quarterly newsletter by: (please circle one)
snail mail or **e-mail**?

Membership form cont...

Enclosed is:

- \$10 family membership
- \$100 corporate membership
- additional donation

Please make cheques payable to:
Okanagan Dog Owners Association

Our association relies entirely on volunteers. If you have interests and/or skills and want to become more involved, *please* check below:

- _____ Park conditions
- _____ Newsletter
- _____ Membership Drives
- _____ Fundraising
- _____ Research
- _____ Activity co-ordination
- _____ Other _____

Degree of interest in participation:

- _____ Committee Chairperson
- _____ Executive Board
- _____ Project Coordinator
- _____ Occasional Participation
- _____ Attend Social Events
- _____ Dues Paying Only

Comments/Suggestions:

Please mail application to:
Okanagan Dog Owners Association
#9-3151 Lakeshore Road, Suite 254
Kelowna BC V1W 3S9