



Four Counties Beagle Club

Please send completed form to: fourcountiesbeagleclub@gmail.com

I/we the undersigned wish to become a member of the Four Counties Beagle Club and hereby do agree to bound by its rules of membership. If elected I agree to to act in accordance with the rules of the club and be bound by them.

Name: _____ **Affix:** _____

Address: _____

Telephone: _____

Email: _____

Website: _____

Membership Fees: Joint - £3.00 Single - £2.00 Junior - £1.00
(Please circle choice)

Proposer: _____ **Signed:** _____

Seconder: _____ **Signed:** _____

(Please note, both the proposer and the seconder must be members of the club)
Data Protection Act: Your data will be shared by the Kennel Club.

Once completed, this form should be returned to the above email address.
Payment will be arranged upon receipt of your submitted form.