



## MEMBERSHIP APPLICATION

Mr./Mrs/Ms. : ..... Surname : .....  
 Initials : ..... First name : .....  
 Adress + Nr. : .....  
 PC + Residence : .....  
 Date of birth : .....  
 Tel. number : ..... Handy: .....  
 E-mail : .....  
 For full membership

Place & Date : ..... Signature: .....

If familymembership:

Mr./Mrs/Ms. : ..... Surname : .....  
 Initials : ..... First name : .....  
 Date of birth : .....  
 Email : .....

Place & Date : ..... Signature: .....

If breeder:

Kennelname : .....

## Authorization for collection of annual membershipfee

IBAN accountnr. : .....  
 Name bank : .....

Data account holder:

Initials : ..... Surname: .....  
 Adress : .....  
 PC + Residence + Country : .....

Place & Date : ..... Signature: .....

Please send this application scanned per email to:

secretaris@hovawartrasverenigingnederland.nl