



www.iwsoi.com

THE IRISH WOLFHOUND SOCIETY OF IRELAND

Cumann na bhFaolchú in Éirinn

Membership Application Form

Name _____

Address _____

County _____ email address _____

Telephone Number (H) _____ Mobile: _____

Do you currently own an Irish Wolf Hound? Yes No please (✓)

If Yes please list the registered name (s) of your dog (s) below

1 _____

2 _____

I hereby wish to apply for membership of the Irish Wolfhound Society of Ireland and agree to abide by the rules of the Irish Kennel Club and those of the Society at all times copy of these rules may be seen at: IWSOI.com

Signed _____ Date _____

Proposed by: _____

Seconded by: _____

Scale of Fees per annum

Single membership please (✓)

Ireland €15 Continental Europe €20 UK £15 US \$25

Dual Membership (Couples) tick the appropriate box please (✓)

Ireland €25 Continental Europe €30 UK £25 US \$40

Junior Membership (under 18) EUR €5

I enclose cheque amount: £ _____

Note: Membership runs from July to June each year and is renewed each July - regardless when membership commenced

Tick this box if you require a receipt. please (✓)

Please return the completed form to : Margaret Wright, 32 Lakelands
Lakeview Road, Craigavon, Co. Armagh
BT64 1AW
Telephone: 028 3831 6350
Mobile: 07761 125 029
email: pinkdragon32@hotmail.com

Note: We welcome membership from around the world please email me for membership rates for your location - at: pinkdragon32@hotmail.com