

COLLECT FROM DOGS NSW OFFICE

POST

Breed:					Sex: M 🗌 F 🗌 N 🗌
Registered Name of Dog:					
Registered Number of Dog:					
Owner's Name:		First:		Surname:	
Owners Membership Number:					
Postal Address:					
Suburb:			Postcode:	Phone:	
Email:					
Type of Sash Required				Quantity	
Postage	Please add \$10.00 for the first sash for postage and \$5.00 for each additional sash after that.				

PAYMENT DETAILS:
Credit Card type: 🗌 Mastercard 🔲 Visa
Card Number
Name on Credit Card:
Signature of Cardholder: Date:

This completed form should be forwarded to: The Secretary, DOGS NSW, P.O. Box 632, St Marys NSW 1790 New South Wales Canine Council Ltd ABN 69 062 986 118 trading as DOGS NSW Ph: 02 9834 3022 Email: <u>info@dogsnsw.org.au</u>