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**WESTERN PROVINCE BULL TERRIER CLUB**  
Office 1, 'The Chambers', 50 Keerom Street, Cape Town 8001  
Docex 215, Cape Town

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**Chairman:** James Mollentze      **Tel** 082 491 8682  
**Vice Chairman:** Juan Slabbert      **Tel** 083 657 4989  
**Secretary:** Jacqui Burger      **Tel** 021 426 5006

Fax : 0865-134449 email : [jacqui@arbitration.co.za](mailto:jacqui@arbitration.co.za) Website: [www.sabullterriers.com/wpbtc.htm](http://www.sabullterriers.com/wpbtc.htm)

**APPLICATION FOR MEMBERSHIP**

**Surname** \_\_\_\_\_ **Title** \_\_\_\_\_

**Name** \_\_\_\_\_ **Kennel Name** \_\_\_\_\_

**Postal address** \_\_\_\_\_

\_\_\_\_\_ **Code** \_\_\_\_\_

**Telephone (w)** \_\_\_\_\_ **(h)** \_\_\_\_\_

**Fax** \_\_\_\_\_ **Cell** \_\_\_\_\_

**E-Mail** \_\_\_\_\_

**Type of Membership:**

**Joining fee (once off) :** R 10-00  
**Single Membership :** R 100-00  
**Double Membership :** R 150-00

(husband & wife or two partners with the same address)

Please Note our 4 monthly newsletters (February, June and October) will be e-mailed to save cost.

**Optional Printed Copy of Newsletter:** R 80-00  
(Posted to your listed postal address)

**Bank Details**

**Bank:** First National Bank  
**Branch:** Tygervalley  
**Acc. No:** 50220025718

(fax copy of deposit slip )

**Total of R** \_\_\_\_\_ **enclosed**

**I / We the undersigned hereby apply for membership with the Western Province Bull Terrier Club and undertake to abide by the constitution of the Club.**

\_\_\_\_\_  
**Signed**

\_\_\_\_\_  
**Date**

**PROPOSED BY** \_\_\_\_\_

**SECONDED BY** \_\_\_\_\_