



Agility Association of Canada



Application For Membership

NOTE: All Dogs Who Compete In AAC Trials MUST HAVE An AAC Dog ID Number

First Name: * _____

Last Name: * _____

Address: * _____

City / Town: * _____ Prov. / State: * _____

PC / ZIP: * _____ Country: * _____

Phone: _____ Other phone: _____

Email: _____

Are you 18 or older? * Yes No

Preferred Language: * English French

Payment Options *

Card No. Visa Mastercard Cheque

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Expiry Date: Total From T1 * \$

Includes Renewal Fees for: * Membership Club Membership

Make Cheques Payable To: AAC
Return Membership Form To: Heather E Taylor
55269 Glen Erie Line, RR 2,
Vienna, ON., N0J 1Z0

Clearly Print Cardholder's Name *

Signature: _____ Date: _____

MEMBERSHIP TYPE: *

	Fee
Individual:	\$25 + Tax
Family:	\$35 + Tax
Club:	\$50 + Tax

You Can Select More Than One Option

GST (5% - AB,SK, MB, QC, PI, NU, NY, YU)

TAXES

HST (12% - BC) (13% - ON, NB, NL) (15% - NS)

_____ %
* Enter your TAX rate.

Fee \$ * _____ Tax \$ * _____ T1 Total \$ * _____

(add applicable tax for your area) Total for Payment

FOR INDIVIDUAL & FAMILY MEMBERSHIP: *

Renew New

Current Membership No. _____

FAMILY MEMBERSHIP INFORMATION - ONLY: *

List Other Family Members 18 & older: _____

Members under 18: _____

CLUB MEMBERSHIP INFORMATION - ONLY: *

Renew New

Club name: _____

Club website: _____

Current Membership No. _____