

KILCONA PARK DOG CLUB MEMBERSHIP FORM - CARD NUMBER

First Name: _____ Last Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone#: _____ E-Mail: _____

Please tell us about your dogs that will be using the off leash dog park:

Name	Breed	Colour	Age

Please find enclosed \$10 for membership fees for the period ending midnight **October 31, 2022**. I understand that this fee will go toward improvements to the dog park, and any major purchases require approval at a general membership meeting.

☐ Cash ☐ Cheque ☐ Credit Card ☐ Debit ☐ Square ☐ PayPal

We are always looking for volunteers at our events, please take a second to let us know if you would be interested in volunteering at any of the following (Please select all that apply) :

<input type="checkbox"/> Spring Park Clean up	<input type="checkbox"/> Fall Park Clean up	<input type="checkbox"/> Any other events low on volunteers	<input type="checkbox"/> Board position
<input type="checkbox"/> Membership drives	<input type="checkbox"/> BBQ's	<input type="checkbox"/> Fundraising events	<input type="checkbox"/> Trail chipping

Please indicate which times work best for volunteering: ☐ Daytime ☐ Evening ☐ Weekends**Canadian Anti-Spam Legislation:**

I expressly consent to KPDC sending me commercial electronic messages and otherwise contacting me through my email and phone numbers above.

Signed: _____ Date: _____

Please make cheques payable to " Kilcona Park Dog Club Inc."

For any questions or concerns please contact us at membership@kpdc.ca**WELCOME TO THE KILCONA PARK DOG CLUB**

If printing, please mail completed form and cheque to:

Kilcona Park Dog Club,
Box 43052, RPO Kildonan Place
Winnipeg, MB R2C 5G5

