



**Australian Association of Professional Dog Trainers, Inc.**

C/- Secretary: 2 Pindari Avenue, Epping, Vic. 3076



*This form must be forwarded with application to the secretary before any processing can be finalised.*

Are you currently providing a dog training service on a professional basis? Please give details, *i.e.* Number of clients, classes per week, day, evenings etc, part time or full time.

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Are you earning a taxable income from the provision of Dog Training? Yes  No

What type of training do you offer? E.g. Basic Obedience, Trial Training, Protection Training / other.

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Why do you wish to become a member of the AAPDT?

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Have you ever been convicted of being cruel to animals? Yes  No

Have you ever been convicted of a criminal offence? Yes  No

Are you registered\* with your local council as a 'Dog Training Establishment'? Yes  No

\* Provide proof of registration

Do you have \$ 20,000,000 public liability insurance? Yes  No

If so attach a copy of certificate of currency.

Are you First Aid qualified? If so attach a copy of certificate of currency. Yes  No

Have you completed a recognised course of instruction to become a dog trainer/instructor? Yes  No

(If Yes please enclose details)

In submitting this, my application for membership to the Professional Dog Trainers Association of Victoria Inc. I hereby agree to abide by its Constitution and By-Laws. I submit herewith the required subscription and joining fee for membership to the AAPDT. Inc. *Send Application Form with fee to AAPDT Inc.- V/P c/- 2 Pindari Avenue, Epping, Vic. 3076*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ENCLOSED: JOINING FEE: \$ 75:00

\* MEMBERSHIP FEE: \$

TOTAL: \$

**\* Membership is renewable on 30 June each year  
For financial year 2017/18 (no pro rata)**