

**The following declaration was passed by the membership at June 23, 2012 AGM as a condition for PADS membership.**

### **Member's Declaration of Values and Code of Conduct**

With this Declaration of Values, the Pacific Assistance Dogs Society lays the foundation for its collective identity and the shared ideals of its Membership. The Declaration is based on the principles, characteristics, and values that have drawn its Members together, and is an extension of their sense of belonging to the Society they have freely joined. The Declaration also has the purpose of demonstrating a resolve to uphold and further the Society's mission.

Communication and conduct are powerful means of conveying the Society's mission and its standing in the community. By what Members say and do, they serve as ambassadors of the Society and create a place where all can contribute to its success. Members are expected to conduct themselves lawfully and ethically, and relate to others in and outside the Society respectfully, professionally and courteously, regardless of where or how interactions involving the Society take place.

#### **Members share the Society's fundamental values of**

- Gratitude – We are grateful for the support of our community and those who share our mission.
- Respect – We hold in high esteem those who support our mission with their time, their money or their actions. We are kind to our dogs and always consider their dignity and health.
- Accountability – We exhibit a high level of care and conduct when considering or taking action.
- Trust – We appreciate those who place their confidence in us, and we act in ways to maintain that level of faith in our mission
- Transparency – We conduct ourselves openly and consider stakeholders and the community as our partners in the fulfillment of our mission.
- Integrity – We are sincere and genuine when we consider or take action.

**I hereby agree to adhere to PADS Code of Conduct.**

**Applicant 1 Name:**

**Applicant 2 Name:**

\_\_\_\_\_

\_\_\_\_\_

**Signature:**

**Signature:**

\_\_\_\_\_

\_\_\_\_\_

*Our by-law states: "Part 2 – Membership - (2.4 d) have executed a Declaration of Values and Code of Conduct, the form of which may be determined by the Members from time to time; and if the Members have not determined the form of the declaration of Values and Code of Conduct, the execution of a written instrument by the person applying for membership stating that the person will comply with the Constitution and Bylaws of the Society will suffice for this purpose.*

**APPLICATION FOR or RENEWAL of PADS MEMBERSHIP  
for the year July 1, 2018 – June 30, 2019**



Consider this an opportunity to invest in a society that enhances the lives of people with disabilities by providing dogs that make a real difference. Membership entitles you to exclusive Member information, be made aware of upcoming events and an invitation to attend and vote at the Society's Annual General Meeting.

*Our by-law states:*

*"Part 3 – Membership - (3.1) A person may apply to the Directors for Membership and on acceptance by the Directors shall be a member subject to the condition outlined in section 6.13" which states "A member in good standing present at a meeting of members is entitled to one vote provided the member has been in good standing for 30 days."*

**Applicant #1 Name: (Please print clearly)**

\_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

*I agree to receive all membership notices and communications via email*

**Applicant #2 Name:** Please complete a separate form if address is difference from above

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

*I agree to receive all membership notices and communications via email*

**I/We would like to:**      **Renew my PADS membership**      **Apply for a PADS membership**

\_\_\_ \$50 **Adult (19+)**

\_\_\_ \$35 **Senior (65+ and those on disability or low income assistance)**

\_\_\_ **Honorary Member (no fee non-voting)**

Total \$ \_\_\_\_\_

Enclosed:      Cheque    Credit Card (complete below)    Cash

Visa    MasterCard     Card Number \_\_\_\_\_

Expiry Date: \_\_\_\_\_ CVV: \_\_\_\_\_ Signature: \_\_\_\_\_

Please Print Name on Credit Card: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Received Date: \_\_\_\_\_ Approved By & Date: \_\_\_\_\_

Tax Receipt #: \_\_\_\_\_

*Pacific Assistance Dogs Society respects your privacy. We protect your personal information and adhere to all legislative requirements with respect to privacy. We do not rent, sell or trade our mailing lists. We use your personal information to keep you informed and up to date on the activities of PADS, including programs, services, special events, funding needs, opportunities to volunteer or give, open houses and more through periodic contacts from PADS and the society. If at any time you wish to be removed from any of these contacts, simply contact us by phone at 604.527.0556 or via e-mail at [info@pads.ca](mailto:info@pads.ca)*