



# NEW SOUTH WALES FIELD & GAME ASSOCIATION

INCORPORATED

## Membership Application Form - New Members Only

Please complete the form below and forward to the Secretary of your Branch

Date \_\_\_\_\_ Branch: \_\_\_\_\_ Member No: \_\_\_\_\_

### MEMBER'S FULL NAME

1. Surname \_\_\_\_\_

2. Preferred Title ( Tick one Box Only )

Mr  Mrs  Ms  Miss  Sr  Dr  Rev

3. First Name \_\_\_\_\_

4. Middle Name \_\_\_\_\_

### POSTAL INFORMATION

5. Address \_\_\_\_\_

6. Suburb/Town \_\_\_\_\_ Postcode \_\_\_\_\_

### LOCATION INFORMATION

7. Address \_\_\_\_\_

8. Suburb/Town \_\_\_\_\_ Postcode \_\_\_\_\_

### CONTACT INFORMATION

9. Work Phone (\_\_\_\_) \_\_\_\_\_

10. Home Phone (\_\_\_\_) \_\_\_\_\_

11. Mobile Phone (\_\_\_\_) \_\_\_\_\_

12. Fax Number (\_\_\_\_) \_\_\_\_\_

13. Email \_\_\_\_\_

### OTHER PARTICULARS

11. Sex (tick box)  Male  Female

12. Date of Birth \_\_\_\_\_

13. Occupation \_\_\_\_\_

14. Interests (Tick one or more boxes)

Hunting  Target Shooting  Conservation  Feral & Pest Animal Control  Firearms Ownership Rights

### MEMBERSHIP DETAILS

15. Membership Type (Tick one box only)

Adult Member  Junior Member  Veteran 55+

Supplementary member (Member No. \_\_\_\_\_)

(Member No. is Membership No. of spouse or Parent, please fill in.)

Honorary Member  Life Member  Social Member

16. Shooting Classification For the next 12months I nominate to shoot in the following ONE category only (Tick one box only)

Open Grade  Lady  Veteran 55+  Super Veteran (NSW only)

Junior (Up to 21 Yrs)  Sub-Junior (Up to 18 yrs)  Associate

Any suggestions for the Sporting Clays Australia, please let us know on the reverse side of this form, compliments or complaints.

Shooter's Licence No. \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

Total Paid: \$ \_\_\_\_\_

Member's Signature: \_\_\_\_\_ Dated: \_\_\_\_\_

Branch Receipt Number -

Club Signature -

Required for processing card