

ANTIQUe ARMS SOCIETY OF AUSTRALIA
APPLICATION FOR MEMBERSHIP

Surname Given Names

Residential Address

Postal Address

Telephone (Private)(Business)

OccupationDate of Birth

Collecting Interests

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1. Have you ever, in Australia or elsewhere, been convicted of an offence, or fined for an offence in respect of:

a. Firearms? Yes No

If yes, provide details

b. Any other offence other than minor traffic? Yes No

If yes, provide details

2. Are you a registered/financial member of other firearms organizations?

<u>Type</u> (e.g. Collecting, rifle, pistol, shotgun, etc.)	<u>Club/Organisation Name</u>

3. Do you hold a current shooters licence? Yes No

	License Type, Categories, State Of Issue:	License Number:
If yes....		

4. Do you object to your name and postal address being used for direct mailing?
Yes No

If accepted into the Society, I agree to be bound by the rules of the Society, and by any amendments thereof registered in accordance with the Co-Operatives Act.

Signature: Witness (Must be signed): Dated:

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Please forward to: Antique Arms Collectors Society of Australia Co-Op Ltd, GPO Box 5156, Sydney, NSW 2001

Joining Fee	\$22.00
Annual Subscription	\$60.00
(Pensioners concession available)	
Total (GST Included)	\$82.00

OFFICE USE ONLY	Membership No
	Receipt No
	Date Processed