

# APPLICATION FOR MEMBERSHIP

Surname \_\_\_\_\_ Given Names \_\_\_\_\_

Residential Address \_\_\_\_\_ Postcode \_\_\_\_\_  
(compulsory)

Postal Address \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone (Private) ( ) \_\_\_\_\_ (Business) ( ) \_\_\_\_\_

Occupation \_\_\_\_\_ Date of Birth \_\_\_\_\_

Collecting Interests \_\_\_\_\_

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

◆ Firearms Yes  No

If yes, provide details \_\_\_\_\_

◆ Any offence other than minor traffic Yes  No

If yes, provide details \_\_\_\_\_

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

Type	Club/Organisation Name
◆ Collecting	_____
◆ Rifle Shooting	_____
◆ Pistol Shooting	_____
◆ Sporting	_____
◆ Hunting	_____
◆ Clay Target Shooting	_____

3. (a) Do you hold a current shooters licence Yes  No

If yes, type of licence \_\_\_\_\_ Licence Number \_\_\_\_\_  
State of issue \_\_\_\_\_

(b) Do you hold any other firearms licences (collector, dealer, etc.) Yes  No

If yes, type of licence \_\_\_\_\_  
State of Issue \_\_\_\_\_ Licence Number \_\_\_\_\_

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 \_\_\_\_\_

Fee for new subscriptions	\$50.00
GST on subscription	\$ 5.00
(pensioner discount available)	
Total (GST Included)	\$55.00

<b>Office use only</b>	
Membership No:	_____
Receipt No:	_____
Date Processed:	_____

Please forward to  
Antique Arms collectors Society of Australia Co-Op Ltd  
G P O Box 5156 Sydney 2001