

The Australian National Archery Association Inc

MEMBERSHIP APPLICATION

DATE:.....

NAME:

.....

ADDRESS:.....

.....

TOWN / SUBURB:.....

STATE:..... POSTCODE:.....

EMAIL:.....

TELEPHONE:..... DOB:..... / /

DD/MM/YYYY

SIGNATURE:.....

\$5 per person.

Membership to ANAA must take place prior to any person shooting at any ANAA club or participating in any ANAA event.

NAME

Date of Birth

.....
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.....
.....
.....

Total Amount: \$.....

In making this application, the member's agree to be bound by the Associations Constitution, polices, rules and procedures for the duration of membership. If the member/s violate any requirements related to the above whilst a member, the member/s, recognizes the rights of ANAA to terminate, suspend or any other action the association determines necessary.

JUNIOR/CUB MEMBERSHIP --- (UNDER 18 Years)

NAME: - Parent/Guardian _____

SIGNATURE: - Parent/Guardian _____

EFT: Bank Details

Account – Australian National Archery Association

BSB: 650 000 – Newcastle Permanent B/S

Account Number: 528143704

ANAA – Postal Address

PO Box 372

Maitland NSW 2320

Email: admin@anaainc.com.au

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