

Full Name:

Address:

Postal Address: as above. Or:

Telephone: Mobile:

D.O.B. Email:

This application is for: *(tick one only)*

\$40 **Full Single** Membership - over 18 years of age

\$20 **Social Single** Membership

\$70 **Social Family** Membership

Family Members: Adult 2:

Child 1: Child 2:

Optional: Please include any information about yourself you wish to provide or comments that you feel may be relevant to your application and should be considered by the committee:

I, the undersigned, hereby apply for membership of the Lower Lakes Stockmans Challenge & Bush Festival incorporated. I have read and understand the membership information provided to me and that I may request a copy of the Rules of the Association prior to making this application. I commit to actively support the objects of the association and agree to be bound by its rules.

I hereby declare that I am not an insolvent under administration.

I hereby declare that I have not been convicted of an indictable offence within or outside the state of South Australia and have not been sentenced to imprisonment within the last five (5) years.

Signature of Applicant: _____ Date: ____ / ____ / 20____

Payment can made by: **CASH CHEQUE** or **DIRECT DEPOSIT** BSB: **085 921** and ACC NO: **139270179**
 Please use your surname as a payment reference and forward your application form as soon as possible to the above postal address. Cheques made payable to **Lower Lakes Stockman's Challenge & Bush Festival Inc.**

Office use only:

Application received by: _____ Date: ____ / ____ / 20____

Considered at the meeting convened on: ____ / ____ / 20____

Membership: Accepted Declined Decision Minuted

Reason Membership declined: _____

Applicant Notified by: _____ Date: ____ / ____ / 20____ Method: _____

Date Paid	Receipt No.	Amount	Payment Method	Signed
/ / 20		\$		