



Inc. #1400344

## Application for Membership

☐ New ☐ Renewal (Tick)

I, \_\_\_\_\_ D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Name of Applicant)

Of: \_\_\_\_\_ Membership No. \_\_\_\_\_  
(Address)

Membership fees per person: One year \$5.00. Three years: \$15 Five Years: \$25

Renewals due on Anniversary of joining date.

Postal orders and cheques accepted

Phone: \_\_\_\_\_ mobile: \_\_\_\_\_ e-mail: \_\_\_\_\_

Are you a member of another archery organisation? Name: \_\_\_\_\_

I hereby apply to become a member of Traditional Archery Australia to be referred to as TAA in this document. I agree to be bound by the rules of the association.

My application confirms my participation in Traditional Archery and my support for the TAA executive committee (referred to as EC in this document) to **"Promoting the Profile of Traditional Archery in all Forms"**. By becoming a member I understand that I officially support the EC to represent me as a member to other official organisations, and that by doing this my name and possibly address will be submitted to confirm my membership with TAA. (your details will only be given to official archery organisations and not used for sales purposes).

Further that,

"Have you ever had your membership to any archery club or archery organisation revoked or cancelled?"

circle: YES NO

IF YES, provide details on the back of this form. You may attach any relevant documentation.

I understand that after signing this form if my membership is revoked from another archery club or organisation I am obliged to advise the TAA secretary in writing including all details.

Signature of applicant: \_\_\_\_\_

**Mail to:**  
**The Membership Officer**  
**Traditional Archery Australia**  
**PO Box 927 Morayfield QLD 4506**

**Office Use:**

Date Received: \_\_\_\_\_ Member Number: \_\_\_\_\_ Date Posted: \_\_\_\_\_