



**TUGGERAH LAKES FIELD ARCHERS INC
MEMBERSHIP RENEWAL FORM**

Name _____ (if known)
(please print) TLFA Member no. _____
address _____
suburb _____ postcode _____
date of birth ____ / ____ / ____ male/female/other (please circle)
phone _____ mobile _____
email _____ (please print)

For your health and safety please list any medical conditions you have. For example, but not limited, to diabetes, epilepsy and asthma.

EMERGENCY CONTACT DETAILS

name _____ relationship _____
phone _____ mobile _____

Are you a member of another Archery Club/s? YES / NO

If yes, name of club/s _____

I HAVE READ, UNDERSTOOD AND AGREE TO ABIDE BY TLFA'S CONSTITUTION AND BY-LAWS.

_____ date ____ / ____ / ____
signature of applicant

For applicants under the age of eighteen (18) years parent / guardian information and signature is required

parent / guardian name _____
phone _____ mobile _____
email _____

_____ date ____ / ____ / ____
Signature of parent / guardian



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FAMILY MEMBERSHIP (additional members) (children under 18 years at time of payment)

I, _____ apply for membership of Tuggerah Lakes Field Archers on behalf of the following person(s) who are members of my family and reside at my address

Full name	M/F	Date of birth	ANAA no (for record)	Expiry purposes only)

I accept responsibility for the above applicant(s) who is/are under the age of 18 years until they attain such age.

_____ date ____ / ____ / ____
signature of parent / guardian

MEMBERSHIP FEES (please tick ONE box)

- Full member \$75.00 Junior \$37.50 Pensioner \$48.75
 Student 18+ \$37.50 (ID card) Family \$131.25 (concession card)
 Non-shooting \$26.25

3 MONTH OPTION (payable 1 July 1 August 1 September)

- Full member \$25.00 Junior \$12.50 Pensioner \$16.25
 Student 18+ \$12.50 (ID card) Family \$43.75 (concession card)
 Non-shooting \$8.75

PAYMENT (please tick one box)

- CASH** **CHEQUE**
 EFT
BSB 032 669 **Account** 920112 **Account name** Tuggerah Lakes Field Archers

Please use your surname as reference and email your transaction record and form to secretary@tlfa.com.au

APPLICATION FOR MEMBERSHIP RENEWAL APPROVED / NOT APPROVED

Name of club official (please print) _____

signature of club official _____ date ____ / ____ / ____

position _____

Office use only

fees paid _____ date ____ / ____ / ____

receipt number _____

- Entered on membership database Entered on emergency contact list
 Membership card issued Form and payment to Treasurer