



Australian Hellenic Game & Conservation Association Inc

Registered No. A0034985C

NEW MEMBER / MEMBERSHIP RENEWAL

MEMBERSHIP NUMBER:

SURNAME: FIRST NAME:

ADDRESS:

SHOOTERS LICENCE NO: EXP. DATE:/...../.....

TELEPHONE NUMBER: MOBILE:

E-MAIL DOB:/...../.....

Membership Type	1 Year	2 Years	5 Years
General Member	\$115	\$215	\$500
Junior	\$40	\$70	N/A
Family	\$135	\$250	N/A
Concession	\$70	\$130	\$300
Firearms Safety Course	\$25		
Expired Membership	\$50		

NOTE: All Expired memberships incur a \$50 administration fee.

Total \$ _____

FAMILY MEMBERSHIPS

Name Age Name Age

Name Age Name Age

Name Age Name Age

CONCESSION MEMBERSHIP Pension Card Number:

The above information is correct and I hereby apply for membership of A.H.G.C and agree to abide by its code of conduct.

Signature.....Date.....

Cheque:
Australian Hellenic Game and Conservation
PO Box 2047
Lalor 3075

Direct Debit.
AHGC
BSB 633000
ACC 188003784

Application received on/...../..... Receipt Number Total Paid.....