

AUSTRALIAN LOWLINE CATTLE ASSOCIATION Application for Junior Membership

This form can be completed in Adobe and saved for your records. Membership Name/s Date of Birth_____/____ (note - if for more than one junior then please give DOB of eldest applicant) Property Address_ Town/City____ Postcode_____ Country____ If member is under 18 years of age please provide details of Parent or Legal Guardian as 'person of contact' below: Is your property address the same as your postal? YES ОИ If NO, please complete details below: Address Town/City_____ Country____ Postcode_____ **HERD INFORMATION** MEMBER ID: series of 3 letters that represent your herd, for example, JJS. This will form the basis of any animal's idents that are bred into your membership and the first 3 characters of your tattoo eg JJSM001 Please nominate three options, listed in your preferred order: Please note - If your preferred Member ID is not available, an alternative ID will be provided. HERD/STUD PREFIX: This word/s will prefix the name you give to each animal you breed eg Southern Cross Casanova

Australian Lowline Cattle Association Inc. C/- ABRI, University of New England Armidale, NSW 2351 Phone: (02) 67 73 3295 Fax:(02) 67 72 1943

2._____ 3.____

*maximum of 20 characters including spaces allowed ** The word LOWLINE cannot be used in your herd/stud prefix

(Southern Cross is the herd/stud prefix and Casanova is the individual animal's name)

Please nominate three options for your Herd/Stud Prefix, listed in your preferred order:

Email: of fice@low line cattle as soc. com. au



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 $\textbf{JUNIOR MEMBERSHIP FEE} \ (per \ financial \ year \ excl \ GST)$

Membership Fee: \$25.00

Establishment Fee (once off fee): \$10.00

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Australian Member (inc GST): \$38.50
International Member (excl GST): \$35.00

	ernational Member (excl GS1): \$35.00
Ιw	ish to pay by:
	EFT Cheque (payable to Australian Lowline Cattle Association)
Na Ac BS AC	NK ACCOUNT DETAILS: tional Australia Bank count Name: Australian Lowline Cattle Association B – 082 407 COUNT NO. – 45 349 8710 ference: <i>Your Name</i>
1.	I/We, the undersigned, apply for membership of the Australian Lowline Cattle Association (ALCA) and agree to abide by th Constitution, Rules & Regulations and adhere to the Code of Ethics.
2.	I/We consent to ALCA using my personal details in accordance with the ALCA Privacy Policy.
3.	I/We certify that the details shown on this form are correct and that I/we have the appropriate authority to sign this application on behalf of the member name applied for.
	IS FORM MUST BE SIGNED BY THE PARENT OR LEGAL GUARDIAN ON BEHALF OF JUNIOR MEMBERS AGED UNDER 18 YEARS DATE OF APPLICATION.
Na	me
Sig	nature Date//
	ease return completed form to Australian Lowline Cattle Association nail (if paying by EFT): office@lowlinecattleassoc.com.au

Post (if paying with cheque): Australian Lowline Cattle Association, C/- ABRI, University of New England, ARMIDALE, NSW 2351