



AUSTRALIAN LOWLINE CATTLE ASSOCIATION

Application for School Membership

This form can be completed in Adobe and saved for your records

Membership Name _____

Full name of the person to be recorded as the nominee of the School

Property Address _____

Town/City _____

State _____

Country _____

Postcode _____

Phone _____

Mobile _____

Email _____

Website _____

If the above details are not your preferred membership contacts, please list extra details below:

Contact Name _____

Phone _____

Email _____

Is the property address the same as your postal? YES NO **If NO, please complete details below:**

Address _____

Town/City _____

State _____

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:

1. _____

2. _____

3. _____

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

*maximum of 20 characters including spaces allowed

** The word LOWLINE cannot be used in your herd/stud prefix

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

1. _____

2. _____

3. _____



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SCHOOL MEMBERSHIP FEE excl GST

Membership Fee: \$40.00

Establishment Fee (once off fee): \$10.00

TOTAL FEE DUE

Australian Member (inc GST): \$55.00

International Member (excl GST): \$50.00

I wish to pay by:

EFT

Cheque (payable to Australian Lowline Cattle Association)

BANK ACCOUNT DETAILS:

National Australia Bank

Account Name: Australian Lowline Cattle Association

BSB – 082 407

ACCOUNT NO. – 45 349 8710

Reference: *Your Name*

1. I/We, the undersigned, apply for membership of the Australian Lowline Cattle Association (ALCA) and agree to abide by the 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.

Signature _____ Date ____/____/____

Please return completed form to Australian Lowline Cattle Association by

Email (if paying by EFT): office@lowlinecattleassoc.com.au

OR

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