

Form 1(21/11/24) APPLICATION FOR <u>MEMBERSHIP</u> OF ASSOCIATION Galloways Australia Incorporated

(incorporated under the ACT Associations Incorporation Act 1991)

I, (full name of applicant)
Of (address)
<i>Occupation</i>
*Signature of applicant Date
Proposer:
I, (full name)
<b>a member of the association</b> , nominate the applicant, who is personally known to me, for membership of the association.
Signature of proposer Date
Seconder:
I, (full name)
a member of the association, second the nomination of the applicant, who is personally known to me, for
membership of the association.
membership of the association. Signature of seconder
Signature of seconder
Signature of seconder       Date         Your application will be considered by the Galloways Australia Inc. Committee. On approval, a tax invoice will be issued to you at the current fee; a schedule of Fees and Charges may be viewed on the website or, contact the Secretary. The effective date of your membership will be the date of payment of the fee.         *By signing this form, you acknowledge the Galloways Australia Information and Privacy Policy and, Code of Conduct which can be found on www.gallowaysaustralia.com.au.         Where did you hear about us?         Please provide the following additional information so we can direct appropriate enquiries (tick boxes where appropriate):         Phone

Do not have cattle \_\_\_\_\_ Looking to purchase Galloway D Belted Galloway D White Galloway D

Are your cattle stud  $\Box$  and/or commercial  $\Box$ ? What studs are represented in your herd; please list?

Scan this form and email to the Secretary, <u>gallowaysaustralia@gmail.com</u> or Post to the address below.