



APPLICATION FOR MEMBERSHIP OF PIONEER ARCHERS INC – Rule 5

I, _____
Given Names Preferred name Last Name

Of _____
Street Address Suburb

Information required under section 27 of the *Associations Incorporation Act (1987)* _____
Postcode

Date of Birth: _____

Contact Details: Home Phone: _____ Mobile: _____
 eMail: _____

Emergency Contact Name: _____
 Phone: _____

Do hereby apply to become a member of the Association.

If my application is accepted, I agree to be bound by the rules, bylaws, regulations and policies and procedures of the Association, Archery WA and Archery Australia, as amended. All rules, bylaws, regulations and policies and procedures are available for download from the respective association's websites. I acknowledge that it is my responsibility to source such documents and ensure that I remain up to date with any amendments that are made.

I have read the reverse of this application form and understand the conditions of membership associated with the application.

Signature: **Date:**

If under 18 years, application must be authorised by parent /guardian.

Parent/Guardian Signature: **Date:**

Fees payable on Application: 2019

Annual Fee:	Adult (18 and Over)	Youth (U18 yrs)	EFT Details Account:
All Fees Are refundable if application rejected			
Club Fees	\$ 50.00	\$ 30.00	Pioneer Archers
Archery WA Affiliation Fee	\$105.00	\$65.00	BSB : 633-000
Archery Australia Affiliation Fee	\$95.00	\$65.00	Account # 173048737
Balance payable on acceptance	\$245.00	\$155.00	

Association Use Only

Membership Type: Place <input checked="" type="checkbox"/> in box	Senior - <input type="checkbox"/>	AA# <input type="text"/>	PAI# <input type="text"/>
	Junior - <input type="checkbox"/>	Associate - <input type="checkbox"/>	<input type="text"/>

IMPORTANT INFORMATION PLEASE READ BEFORE SIGNING

Your application will be submitted to the next meeting of the committee of management.

IMPORTANT INFORMATION (*Weapons Regulations 1999 – Prohibited Weapons – Crossbows*)

Pioneer Archers Inc. only cater for archers using Compound, Recurve and Longbows, the club is not able to provide facilities for Arbalest and therefore will not support an application for membership.

INFORMATION FOR APPLICANT

If your application is accepted, your name and address, as provided above, **must** be recorded in a register of members and be made available to other members, upon request, under section 27 of the *Associations Incorporation Act*. If the obligations under the *Associations Incorporation Act* are not complied with the Association can be wound up.

CONTACTING THE ASSOCIATION

You can contact the Association at

**PO Box 2152 Seville Grove WA 6112 or
email secretary@pioneerarchers.com**

OTHER INFORMATION

If your application is accepted you are entitled to inspect and make a copy of the register of members under section 27 of the *Associations Incorporation Act*. If your application is accepted you are entitled to inspect and make a copy of the rules (constitution) of the association under section 28 of the *Associations Incorporation Act*.

If your application for membership is rejected by the Committee:

You may give notice of your intention to appeal within 14 days of being advised of the rejection (rule 5(4)). The Association in a general meeting, no later than the next annual general meeting, must confirm or set aside the decision of the Committee rejecting your application, after giving you a reasonable opportunity to be heard or to make written representations to the general meeting (rule 5(5)).

Membership Year

The annual membership fee is for a twelve month period from the date of application. Our membership process is managed through the Archery Australia MyArchery database. Members are automatically emailed by the system when your membership requires renewal. For more information on membership options, Multi-club membership etc, please consult a club official.