



**Shooters Fishers & Farmers Membership Application Party**  
**P O Box 247**  
**Claremont Tas 7011**

(PLEASE WRITE IN BLOCK LETTERS)

I wish to join the Shooters and Fishers Party

Membership costs \$30.00 per year

**\*= MANDATORY**

\* Surname: \_\_\_\_\_ Title e.g.(Mr/Mrs/Miss/Ms/Dr) \_\_\_\_\_

\* Given Names: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\* Address: (residential) \_\_\_\_\_ \* Postcode: \_\_\_\_\_

\* Address: (postal) \_\_\_\_\_

\* Telephone: (home) \_\_\_\_\_ Work: \_\_\_\_\_

Mobile \_\_\_\_\_ Email \_\_\_\_\_

I wish to be attached to the Tasmanian Branch of the Party

I hereby apply to become a member of Shooters & Fishers Political Party.

My main interests is/are:  Shooting/Hunting  Fishing  4WD  Other

Please indicate your primary shooting/fishing/4WD/other Club

- I declare that I will abide by the terms of the party constitution as published on the party website.
- I consent to my membership being sent to the AEC to support the party's application for registration and to being contacted by the AEC about my membership of this political party.
- I am aware that it is a serious offence to make a false declaration.

Members Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Recommend by.....Member NO.....

Payment Details

Enclosed is my cheque/money order for \$  
*Make payable to Shooters and Fishers Party*

**OR Debit my Visa – MasterCard (circle one)**

Credit card No: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Cardholders Name: \_\_\_\_\_ Total Amount \$ \_\_\_\_\_ Date \_\_\_\_\_

**Donations (Optional)**

Donations up t \$100.00 are tax deductible

I wish to donate \$ \_\_\_\_\_ to the Shooters and Fishers Party

Pay direct into our NBA Bank Account

**NAB Shooters and Fishers Party    BSB 082730    Account 88176178**

Lorraine Bennett  
0406 897 972

or online

<http://WWW.shootersfishersandfarmers.org.au>

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