



Australasian Alpaca Breeders Association Inc.

ABN 80023141619 INC 9884325

MEMBERSHIP APPLICATION

NOMINATED INDIVIDUAL DETAILS

Name:	<input type="text"/>		
Postal address:	<input type="text"/>	Town/City:	<input type="text"/>
Postcode:	<input type="text"/>	State:	<input type="text"/>
	<input type="text"/>	Country:	<input type="text"/>
Telephone:	<input type="text"/>	Mobile telephone:	<input type="text"/>
Email address:	<input type="text"/>	Website address:	<input type="text" value="www."/>
Farm address:	<input type="text"/>	Town/City:	<input type="text"/>
Postcode:	<input type="text"/>	State:	<input type="text"/>
	<input type="text"/>	Property Identification Code (PIC No.):	<input type="text"/>

ASSOCIATE DETAILS (associate membership is covered by the payment made by the individual)

Name:	<input type="text"/>		
Contact address:	<input type="text"/>	Town/City:	<input type="text"/>
Postcode:	<input type="text"/>	State:	<input type="text"/>
	<input type="text"/>	Country:	<input type="text"/>

STUD DETAILS

Requested Herd Prefix (i.e., stud name or pedigree name):	<input type="text"/>
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CURRENT HERD NUMBERS & REGISTRATION DETAILS

Female huacayas:	<input type="text"/>	Entire male huacayas:	<input type="text"/>	Castrated male huacayas:	<input type="text"/>
Female suris:	<input type="text"/>	Entire male suris:	<input type="text"/>	Castrated male suris:	<input type="text"/>
Name of any organisations that your animals are registered with:	<input type="text"/>				

PAYMENT

I/We have included the total amount payable shown below. Should application not be successful, payment will be refunded in full.

Payment comprises (please tick):

<input type="checkbox"/>	\$20.00	Application/joining fee
<input type="checkbox"/>	\$65.00	Annual membership subscription <i>-(applications dated 1 Apr – 30 Sep)</i>
<input type="checkbox"/>	\$48.75	Pro-rata membership subscription <i>(applications dated 1 Oct – 31 Dec)</i>
<input type="checkbox"/>	\$32.50	Pro-rata membership subscription <i>(applications dated 1 Jan – 31 Mar)</i>
<input type="checkbox"/>	\$	TOTAL amount payable to AABA

PAY ONLINE at online.aaba.com.au or

Bank Transfer

BANK: Commonwealth
A/C NAME: AABA
BSB: 062 603
A/C NO.: 1034 7975
REF: Your surname

AGREEMENT

I/We authorise AABA to supply my/our postal details for the sole purpose of the supply of published material related to alpacas (e.g., the *World of Alpacas* magazine): Yes No

I/We authorise AABA to publish our contact details on membership lists and directories: Yes No

I/We hereby apply to become a member of the Australasian Alpaca Breeders Association Inc. In the event of my/our admission as member, I/we agree to be bound by the rules of the association. I/we indemnify absolutely the association in respect of a decision to refuse this application.

Signature of applicant:	<input type="text"/>	Date:	<input type="text"/>
Signature of associate:	<input type="text"/>	Date:	<input type="text"/>

OTHER SKILLS

Please list any skills/interests that you have or would like to develop that could contribute to AABA's continued growth and success:

Computer programs, graphic design skills:	<input type="text"/>
Writing, editorial, or journalism experience:	<input type="text"/>
Research, marketing and/or fleece analysis experience:	<input type="text"/>

AABA ADVERTISING

How did you find out about AABA?	<input type="text"/>
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