

FAMILY ONLY

# Lakeside Bowmen Inc. Probationary Membership Application Form

Tax Invoice, ABN Number 89 977 361 432  
Webpage: [www.lakesidebowmen.au2.com](http://www.lakesidebowmen.au2.com)

PO Box 72, Petrie QLD 4503  
Phone: 0458 55 0452

I, (full name) JOHN SMITH DOB if <18 ..... M/F M  
Of (full address) 19 CIRCLE RD KALLANGUR P/C 4503 ABA No. ....  
Tel. No. (H) 3204 0000 (W) ..... Occupation SALES

Proposed by ..... Seconded by .....

**Apply for Membership in the Class of Probationary Member of Lakeside Bowmen Inc. IA no 03311.**  
If accepted, I, the applicant, undertake to comply with the Constitution & Rules of Lakeside Bowmen Inc. & of the Australian Bowhunters Association Inc. (incorporated in the N.T no AO 1978C, ABN 79 750 431 225, hereinafter called "ABA"). I acknowledge that Probationary Membership is for an initial period of 3 (three) months only. Additionally, I acknowledge that Field Archery & Bowhunting are shooting sports conducted in the natural environment which carry inherent risks. Consequently, on becoming a Member of Lakeside Bowmen Inc, I accept responsibility for any injury I may sustain in such circumstances & acknowledge & waive any right of action against Lakeside Bowmen Inc and the ABA, its members & affiliated Clubs, & absolve Lakeside Bowmen Inc and the ABA, its members & affiliated Clubs from any liability in relation thereto.

I have read, understood & consent to the above & certify that the information is correct.  
Signature of Applicant [Signature] Date 20.9.10

**Extras:** I, the applicant, also wish to make application for similar Membership of Lakeside Bowmen Inc. for the following persons, who are members of my family, & reside at my address:-

Full Name of Applicant	M/F	DOB if <18	ABA No.
JENNY SMITH	F		
JAMES SMITH	M	16.7.93	
TRACEY SMITH	F	1.3.98	

Junior & Cub Members (those who are aged less than 18 years old) whose parents or guardians are not also members of Lakeside Bowmen Inc. MUST have the following section completed by their Parent/Guardian.

I, (full name) .....  
Of (full address) ..... P/C .....  
Being the parent or guardian of the above Junior or Cub applicant(s) do undertake responsibility for the applicant(s) until he/she/they reach the age of 18 years.  
Signed ..... Date .....  
Parents or guardians of Juniors/Cubs must bring this form back personally.

**FEES**

Probationary Membership	Family \$33	Adult \$22	Junior/Cub \$11
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Total Fees Paid \$33 Receipt No. .... Received By ..... Date .....  
Card Issued .....

I wish to receive the club newsletter by email  Yes/No  
NB: The cost of receiving your newsletter by snail mail per year is \$10 to be paid prior to receiving your first newsletter

To receive your Club Newsletter by email  
Write your email address here (Legibly): j.smith @ internet.on.qd