01/2026

MEMBERSHIP FORM

Post completed form to:

Office Manager ABA
PO Box 152
Redbank Qld 4301
Phone (07) 3256 3976
or email to: officemanager@bowhunters.org.au

Renewal ❒
New Member ❒

ABA Membership Nº: .....

I, (full name) ..... (M-F) .....

of (street # & name) ..... (town-city) ..... (p-code) .....

Postal address (PO Box #)..... (town-city) ..... (p-code) .....

Phone number ..... Date of birth ...../...../.....

Email address.....

do hereby wish to make application for membership of the Australian Bowhunters Association Ltd (ABA), and if accepted, do undertake to conduct my/our membership in accordance with the Constitution, Rules, Policies and Code of Ethics of the ABA. Additionally, I/we acknowledge that Field Archery and Bowhunting are shooting sports conducted in the natural environment which can impose inherent risks and this application is made in full recognition of the Association's requirement for responsible and ethical behaviour. I/We undertake to do all in my/our power to preserve the good image of the sport and ABA. I/We understand that members breaking the Code of Ethics and/or ABA's regulations may be subject to sanctions as per the Constitution.

I am a member of ..... (Club)

I agree my contact details can be provided to form a contact list to be used within the Australian Bowhunters Association only.
If you do not agree, tick this box: ❒

I agree for photos to be taken and used for promotional purposes by the Australian Bowhunters Association.
If you do not agree, tick this box: ❒

I enclose the required fees of $..... *Signature of Applicant* _____

I, the applicant above, also wish to make application for membership of ABA Ltd on behalf of the following persons, who are members of my family and reside at my address:

Full Name of Applicant	Male-Female	ABA Number	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I am prepared to accept the responsibility for the above applicants who are under the age of 18 years, until they attain such age.

Parent-Guardian Signature _____ ABA Number if Applicable: _____

The Australian Bowhunters Association Ltd reserves the right to refuse, suspend or terminate the membership of any person whose conduct contravenes the Constitution, Rules and Policies of Association of the ABA. Failure to provide information sought or supply of incorrect information may result in application being rejected. By applying for membership of Australian Bowhunters Association Ltd (a not-for-profit public company limited by guarantee), you acknowledge that should the company be wound up while you are a member, or within 12 months after you cease to be a member, and should the company have any debts or liabilities at the time of winding up, you agree to contribute an amount not more than $1 to the property of the company.

RENEWALS and/or Advance Memberships for existing members

	12 months	3 years in advance
Adults	$83	$227
Juniors-Cubs	$55	$160
Families	$177	$480

New Members (12-month membership including joining fee)

Adults	$110
Juniors-Cubs	$83
Families	$227

GOVERNMENT AGE PENSIONER DISCOUNT: Deduct 10% from fees listed.

Quote Government Age Pension Benefit Card Number: .....

All fees include GST

ASSOCIATION USE ONLY
M'ship #s Allocated
Receipt Number
Computer Entered
M'ship Forwarded

Note: Dates of birth must be shown for all persons listed. Club name must be shown. **Family membership applies only to parents and their children under 18 years of age.** Separate single membership must be taken for children over 18 years. Couples without children under 18 years also pay separate single membership. In the case of family renewals, state ABA membership numbers. If insufficient space, use additional form.

Card Number ↓ NAME OF CARDHOLDER *(print)* _____

❒ Visa
❒ Mastercard

Expiry Date *(mm yy)* CCV Signature _____

APPLICATION FORM FOR MEMBERSHIP TO THE
AUSTRALIAN BOWHUNTERS ASSOCIATION™ Ltd
GST TAX INVOICE GST ABN 29 093 577 603