



ABN: 63 396 072 164

IPSC (Australia) Inc AFFILIATION FORM 1 July 2014 – 30 June 2015

It is your decision what information you provide; if you choose not to provide the information usually collected or you are unable to provide such information, it may result in your membership being restricted or void. IPSC (Australia) Inc will treat your personal information in a strictly confidential manner. Information pertaining to you will only be disclosed with your consent, or if required by law. You may obtain access to any of your personal information held by us, on request.



Please return your completed form and payment to:

For all membership enquiries contact the SA Membership Officer on 0421 053 093 or ipsc@projectability.com.au

NB: Membership of IPSC (Australia) Inc is subject to membership of an IPSC affiliated Club and validation by your Section.

IPSC (SA) Inc
PO Box 353
GREENWITH SA 5125
Email: ipsc@projectability.com.au

| Member Details | | | | | | | | | | |
|--------------------|--|--------------------------------|--|---------------------------------|---------------|--|---|-----------------------------|--|--|
| Member ID | | | | | | | | | | |
| Name | John Simpson | | | | | | | | | |
| Postal Address | PO Box 84 | | | | | | | | | |
| Suburb | Quorn | | | State | SA | | Post Code | 5433 | | |
| Email address | feetnframes1@bigpond.com.au | | | | | Communicate by email? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | | |
| Date of Birth | 24/10/1964 | Gender: | Male <input checked="" type="checkbox"/> | Female <input type="checkbox"/> | Phone Home | | | | | |
| Phone Work | | | | | Mobile – Work | 0433129840 | | | | |
| Mobile | 0433129840 | | | | Fax | | | | | |
| Disciplines | Pistol <input checked="" type="checkbox"/> | Rifle <input type="checkbox"/> | Shotgun <input type="checkbox"/> | NROI: | Member No | Rank | | | | |
| Handgun Licence No | 127732D | | Expiry Date | 31/08/15 | | Issuing State | SA | | | |
| Club Membership | Quorn Shoot & pistol Club | | | | | <i>Note: Your membership is subject to your being a financial member of a Club which is affiliated to IPSC (Aus) Inc</i> | | | | |
| SSAA Membership | <i>Membership of SSAA is recommended</i> | | SSAA Member No | | | | SSAA Expiry Date | DD / MM / YY | | |

| Family Members (includes spouse, partner or dependant student children under 25 at the same address as the primary member) | | | | |
|--|------------|--------------|---------------|----------|
| As the person completing the form, are you the: Primary Member? <input type="checkbox"/> Family Member? <input type="checkbox"/> | | | | |
| <i>Please add below the details of all members of your family who are also IPSC members</i> | | | | |
| Surname | First Name | Relationship | Date of Birth | IPSC No. |
| | | | DD / MM / YY | |
| | | | DD / MM / YY | |
| | | | DD / MM / YY | |
| | | | DD / MM / YY | |
| A separate affiliation form must be completed for each family member | | | | |

| FEE STRUCTURE (mark the appropriate box) | | | | |
|---|----------|-------------------------------------|--|----------------------------------|
| Full Member/Primary Family Member..... | \$100.00 | <input checked="" type="checkbox"/> | First Family Member (e.g. Spouse) | \$50.00 <input type="checkbox"/> |
| Age Concession (65 and over on 1.7.2014) | \$75.00 | <input type="checkbox"/> | All other additional family members under 25 living at home | \$25.00 <input type="checkbox"/> |
| Junior, if not family (over 18 but under 21 years on 1.7.2014)..... | \$50.00 | <input type="checkbox"/> | Junior (under 18 on 1 July 2014) | \$00.00 <input type="checkbox"/> |
| Late RENEWAL Fee payable if renewal made after 31.7.2014 | \$10.00 | <input type="checkbox"/> | NEW members joining after 1 Jan 2015, pay half the indicated fees (and get half of any discount) applicable. Check box if applicable..... | <input type="checkbox"/> |

| APPLICATION | | |
|---|-----------|------|
| All new member applications must be accompanied by a copy of your proficiency training certification signed by an authorised member of your club | | |
| <i>I hereby apply for affiliation/re-affiliation with IPSC (Australia) Inc</i> | | |
| Name of Applicant | Signature | Date |
| John Simpson | | |

| CONFIRMATION BY SECTION COORDINATOR (Leave this part blank and send the form to the address at the top of the form) | | | | | | | | | | | | |
|---|-----|-----|---------|-----|-------|--------------|------|-------|----------------|-------|-------|------------------------------|
| <i>I confirm the applicant has been accepted by the Section and their Holster Proficiency and Grading record is as follows:</i> | | | | | | | | | | | | |
| Name | | | | | | Signature | | | Date | | | Holster Proficient? |
| | | | | | | | | | | | | Yes <input type="checkbox"/> |
| | | | | | | | | | | | | No <input type="checkbox"/> |
| Handgun Grades | | | | | | Rifle Grades | | | Shotgun Grades | | | |
| Open | Std | Prd | Classic | Rev | O/Man | S/Man | Open | S/Man | Open | S/Man | S/Man | |

Please note that your application will not be processed until both payment and paperwork has been received in SA



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Details for Payment by Direct Deposit (EFT)

Recipient IPSC(SA) Inc
Bank NAB
BSB 085-443
Account 489217992
Reference [Your Surname]-[Your First Name Initial] e.g. SMITH-J

Credit Card Payment

Master Card **Visa Card**

Name on Credit Card _____

Card Number

Expiry Date MM/YY) /

Signature of Cardholder _____

Below this line for IPSC(SA) use only

Date posted

Authorisation code