



**SSAA WODONGA BRANCH, HANDGUN CLUB ANNUAL
SUBSCRIPTION PAYMENT ADVICE CLUB YEAR 2017/2018**

I, the undersigned, make application to apply/renew my membership of the Club.

Name: _____ **D.O.B** _____

Postal Address: _____

Signature: _____ **Date:** _____

SSAA Membership Number: _____

Payment of \$180.00 individuals / Pensioners \$140.00 or \$230.00 family - Period 1st July 2017 – 30 June 2018 - Circle payment method cheque/cash/money-order/direct debt. (Bank Details: Sporting Shooters Assoc - ANZ – 013-920 A/c 2197-14809). Please **quote surname** as reference if paying by D/D) Chq's to be made out to **SSAA Wodonga HGC**. Form must be return; either in person, email: rnicpoll@gmail.com or post to Secretary HGC (SSAA), PO Box 715 Wodonga Vic 3689

CONTACT DETAILS

Email address: _____

Best Contact No: _____

Handgun Licence Number _____ Expire Date _____

Residential Address (as above) or _____

IPSC Member? YES / NO if Yes, Member Number: _____

IHMSA Member? YES / NO (Metallic Silhouette's) if Yes, Member Number: _____

Holster qualified card? YES / NO if Yes, from which Club _____

Range Officer? YES / NO if Yes, Number _____ and which club _____