

**The Secretary  
SSAA Fraser Coast Branch Inc.  
PO Box 1243  
MARYBOROUGH QLD 4650**

## **BRANCH AMENITIES FEE**

**\$ 50.00 Adults \$2.00 Juniors**

**Please complete the following form and either submit via the **SUBMIT** button or print out and mail with payment to the above address .**

Name..... 12 months ending 30th June .....

Postal Address.....

City..... State..... Post Code.....

Date of Birth.....

Home Phone..... Mobile.....

Email Address.....

Send Newsletter via Email? Yes.. No..

SSAA Member Number ..... SSAA Expiry Date.....

Firearm Licence Number..... Expiry Date.....

Concealable Licence Number..... Expiry Date.....

Holster Proficiency Card Holder ? Yes.. No..

Branch Range Officer ? Yes.. No..

State Range Officer ? Yes.. No..

Signature ..... Date .....

### **I will use the following payment system:**

Bank Deposit / Electronic Transfer ..

Posting Chq/Money Order ..

Cash paid to range officer

### **Electronic Banking Details:**

**Name: SSAA Fraser Coast Branch Inc.**

**BSB: 638-070**

**A/c No: 737 4550**

**Please enter your name and SSAA Member Number in the Reference section on the electronic Deposit form.**