

Application form for membership to the
**BALLARAT ARMS AND MILITARIA
COLLECTORS SOCIETY Inc.**

Please complete this form with care. All details in block letters.

Applicants full name

Postal address

post code

Residential address

post code

Home email address.....

Date of birth **Nationality**

Home Phone (.....)

(Is this a silent number? **Y N**)

Bus Phone (.....)

Occupation

Mobile Phone

Licences (Victorian) held at of the date of application. (**Tick Box**, and include expiry date)

ENTER THE FIRST 6 NUMBERS ONLY OF YOUR LICENSE.....

Victorian Shooter's

Expiry Date.....

Victorian Antique Handgun Collectors's

Expiry Date.....

Victorian Firearms Collector's Cat 1

Expiry Date.....

Victorian Firearms Collector's Cat 2

Expiry Date.....

Victorian Ammunition Collector's

Expiry Date.....

Victorian Pistol Licence (e.g. VAPPA etc.)

Expiry Date.....

Victorian Hand Gun Licence (e.g. Security Industry)

Expiry Date.....

Firearm Dealers Licence

Expiry Date.....

GIC Permit - Weapons Act 2000 (Vic)

Expiry Date.....

CCA Approval - Weapons Act 2000 (Vic)

Expiry Date.....

What are your collecting interests or other reasons you have to join the Society (*please be as detailed as you can.*
Please include collection type and sub-reason if your collection includes handguns)

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Full name of first referee

Postal address of first referee

post code

Contact phone number of first referee ()

Full name of second referee

Postal address of second referee

post code

Contact phone number of second referee ()

Declaration

I, the undersigned, declare and affirm that in becoming a member of the Society, I do state that;

- 1 The details listed on the reverse of this sheet are, to the best of my knowledge, correct at the time of signing and I undertake to advise the Society of any changes.
- 2 I agree to abide by the rules of the Society and also to any lawful changes to such rules, as they may occur from time to time.
- 3 I have not within the last 10 years been found guilty by a court for a crime of violence or dishonesty, nor am I currently a prohibited person
- 4 I have no intention of deposing the Government of Australia, or of the States and Territories, other than by true democratic process.
- 5 I agree to support the aims and activities of the Society in concept and where possible, by deed.
- 6 I will do nothing that will bring the name of the Society into disrepute.
- 7 I understand that failure to pay the Annual subscription within twenty eight days of the due date (June 30th each year) will mean automatic termination of my membership.
- 8 I understand that, where the continuation of a licence is dependent on my ongoing financial status with the Society, and that the Society is obligated to report un-financial members to the appropriate authority within twenty eight days of that payment falling due.
- 9 I understand that licences held by me and issued because of my membership of the Society, will be at risk of cancellation if I fail to maintain the financial membership, unless I am also a member of another organization, whose aims are also approved.
- 10 At the time of making this declaration, I am compliance with the storage requirements pertinent to current possessions.
- 11 I shall continue to comply with the storage requirements appropriate to firearms and other any licensed responsibility to be aware of legislative changes as and when they occur and remain compliant.

Signed (*Applicant's signature*) **Date**

Witnessed (*Authorised person*) **Date**

Witness **MUST** be an **Authorised Person** (i.e. Police Officer, JP, Pharmacist, etc)

Checklist before returning application: -

1. This form must be printed double sided, completed both sides and witnessed
2. Two written references on separate sheets and, signed by the author, who may NOT be a close family member

Return to - BAAMCS. PO Box 1210. Bakery Hill 3354. Do NOT enclose ANY payment