

# Chianina Society of Australia

## Application For Membership

I/WE: \_\_\_\_\_

Wish to become a member of the Chianina Society of Australia Inc.  
and agree to abide by the Constitution and By-Laws of the Association.

PROPERTY NAME: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: (     ) \_\_\_\_\_

FACSIMILE: (     ) \_\_\_\_\_

EMAIL: \_\_\_\_\_

**STUD NAME** \_\_\_\_\_

1ST CHOICE: \_\_\_\_\_

2ND CHOICE: \_\_\_\_\_

3RD CHOICE: \_\_\_\_\_

**TATTOO PREFIX (3 LETTERS ONLY)**

1ST CHOICE: \_\_\_\_\_

2ND CHOICE: \_\_\_\_\_

3RD CHOICE: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

*Where an application for membership is a Partnership or Company  
the following should be completed:*

FULL NAME OF THE PERSON TO BE RECORDED  
AS THE NOMINEE OF THE PARTNERSHIP OR COMPANY: \_\_\_\_\_  
\_\_\_\_\_

### Membership

Joining Fee \$50.00

Annual Subscription \$15.00

**Total (includes GST) \$65.00**

Payable by cheque  
to the Chianina Society

Please return to: \_\_\_\_\_

**Executive Officer**  
**Chianina Society of Australia**  
**ABRI, UNE**  
**Armidale NSW 2351**

Enquiries to: \_\_\_\_\_

**Chianina Society of Australia**  
**Tel: (02) 6773 3126**  
**Fax: (02) 6772 1943**  
**Email:**  
**john.thomas@abri.une.edu.au**