

Australian Clay Target Association Inc.

2025 ANNUAL REGISTRATION & CLUB MEMBERSHIP APPLICATION



Membership Number (compulsory)				Shooters Licence Number			
Surname (compulsory)				Given Name (compulsory)			
Address (compulsory)							
Email (compulsory)					Post Code		
Mobile Ph Number (compulsory)					Date of Birth (compulsory)		/ /
I hereby apply for membership of the _____ Club Please tick one: As a continuing, or new member, together with my application for A.C.T.A. registration for the year ending 31st December 2025. I have previously been a registered member with the A.C.T.A.							
Type of Membership: (Membership includes Insurance)							
Club Membership						\$	
State/Zone affiliations if applicable						\$	
A.C.T.A. Full Membership						\$133.00	\$
Partner (spouse) of a Full Member of common address						\$93.00	\$
Veteran (Eligible to apply for Pension/65 years at 31/12/24)						\$93.00	\$
Concession/Loyalty (30 years adult membership)						\$93.00	\$
Junior Membership (Under the age of 18 at 31/12/24)						\$44.00	\$
Recreational Member (Shoot TARGETS ONLY & PRACTICE at any A.C.T.A. Club)						\$67.00	\$
Introductory Compak Member - Other Assn Number:						\$10.00	\$
Levy (applies to ALL new memberships except Juniors, Introductory Compak and Complimentary Free Limited Members)						\$10.00	\$
Failure to provide all information will see your application declined and returned						Total	\$
The A.C.T.A protects the privacy and security of information provided by you. By completing this form, you agree to the use of your personal information by A.C.T.A.: to process your registration details; to disclose to Clubs affiliated with A.C.T.A for regulated events; and for internal purposes and other opportunities presented from time to time.							
I undertake to abide by the Rules and By-laws of the above-mentioned Club, my State Association and the Australian Clay Target Association and I advise that I conform with my State of residence Firearm Regulations and shall notify my Club immediately upon non-renewal, cancellation or suspension of my shooter's licence.							
Signature						Date / /	
THIS FORM IS TO BE PROCESSED BY YOUR CLUB – THE FORM WHEN COMPLETED IS TO BE RETAINED BY THE CLUB							