**TAX INVOICE**

**S.S.A.A.(PARA BRANCH) Inc.**

**GPO BOX 2013**

**ADELAIDE, 5001 DATE**

**ABN 35090334050**

**Expiry Date:**

**Invoice To:**

**SSAA PARA MEMBERSHIP RENEWAL**

Membership Type............ $

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL (Inc GST) $**

Payment Methods:

Post:

Cheque / Money Order to

SSAA PARA

GPO Box 2013

Adelaide 5001

Credit Card Phone:

Please ring the canteen on

8289 6918 between

10am - 4:30pm

In person at the canteen on your next visit to the club:

Cash / Card / Cheque / Money Order

**Appropriate cards must be sighted or attached for pensioner and student membership category**

If you do require financial or any other assistance, please contact the club secretary on **0467 763 716** to work out a payment program suitable to your needs. If you do not wish to continue with your application please contact the secretary so your application can be closed.

**PLEASE NOTE NO MEMBERSHIP CARDS WILL BE ISSUED UNLESS THE FOLLOWING INFORMATION HAS BEEN COMPLETED**

**S.S.A.A. BRANCH NUMBER S\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**S.S.A.A. MEMBERSHIP NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**S.S.A.A. EXPIRY DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HAVE YOU EVER HAD A FIREARMS LICENSE REFUSED OR REVOKED?**

**YES NO**

**LICENCE DETAILS**

**Licence Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Licence Categories (please circle) A 1 2 3 4 5 6 7 8 9 10 11 12**

**B 1 2 3 4 5 6 7 8 9 10 11 12**

**H 1 2 3 4 5 6 7 8 9 10 11 12**