

APPLICATION FOR CLUB AFFILIATION

Affiliate Name		
Mailing Address For Correspondence		
Name of President	CATS NSW INC. Membership No.	Email Address
Name of Secretary	CATS NSW INC. Membership No.	Email Address
Club Members Name	Position Held	CATS NSW INC. Membership No (If Applicable)
Application Fee	\$125.00 Includes Insurance Levy on a per show basis	
<p>The members of (club name) apply for Affiliation with CATS NSW Inc. in accordance with the Constitution and Rules of CATS NSW Inc. We the undersigned hereby certify that the details recorded above are true and correct to the best of our knowledge.</p> <p>President..... Date</p> <p>Secretary..... Date</p>		

Please make cheques payable to:	CATS NSW INCORPORATED
Direct Debit Funds transfers (EFT) to:	CommBank - BSB: 062572 Account No: 10196375
Account Name:	Cats NSW Incorporated Show & Fundraising Account
Email Address:	secretary@catsnsw.com.au

Date Received		Date Approved		Date Declined	
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(Office Use Only)