

Application for Membership

Incorporated under the Associations Act 2009

(Form Updated 10/8/2025)

| First Name | | Surname | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------|-----------|---------|---------------|--|--|
| First Name | | Surname | | | | | |
| Residential Address | | | | | | | |
| Postal Address (if different from above | | | | | | | |
| Mobile Phone Number Alternate Phone Number Email address | | | | address | | | |
| Cat Breed owned or of interest | | | | | | | |
| I/we hereby apply to become members of Cats NSW Inc. In the event of my/our acceptance as a member, I/we agree to abide by the constitution and the Rules & Regulations of Cats NSW Inc whilst member/s of Cats NSW Inc. I/we understand that this application is for Membership ONLY and will not be active until it is accepted by the committee of Cats NSW Inc and all monies pertaining to it are paid in full to Cats NSW Inc. I/we hereby agree that all members of this application reside in NSW or the ACT including those in joint and family | | | | | | | |
| memberships. Associate Memb Signature/s | ers may reside in NSV | V/ACT or othe | r states. | | Date | | |
| 0.8.1.0.0 | | | | | 24.0 | | |
| Signature/s | | | | | Date | | |
| Name & signature of parent/Guardian if applicant under 18years of age. | | | | | Date | | |
| Details of Cats NSW Members | supporting this appl | ication | | | | | |
| I, a current full member of Cats NSW Inc nominate the applicant/s for membership of Cats NSW Inc | | | | | Membership No | | |
| Signature | | | | | Date | | |
| I, a current full member of Cats NSW Inc second the applicant/s for membership of Cats NSW Inc | | | | | Membership No | | |
| Signature/s | | | | | Date | | |
| Membership Category you wish to apply for (please tick one ONLY) | | | | | | | |
| ☐ Single ☐ Joint ☐ Family ☐ Junior ☐ Pensioner single ☐ Pensioner Joint ☐ Associate Single ☐ Associate Joint/Family | | | | | | | |
| | | | | | | | |



| I/we understand that approval of this membership to Cats NSW Inc is NOT approval to breed cats. To become a registered breeder, I MUST complete and application for Registration of Prefix for consideration by Cats NSW Inc. I/we MUST NOT breed any cats until I/we have applied for and been approved for a breeder's prefix. | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------------|--|--|--|--|--|
| | MUST be registered on the Cats NSW Inc | - | | | | | |
| _ | _ | | | | | | |
| prefix and colours and or patterns (this does not apply to associate members). Unrecognised features and breeds that are not recognised by The Australian Cat Federation will not be registered and can not be used in a breeding program | | | | | | | |
| Yes, I/we understand and agree the above terms and conditions | | | | | | | |
| Signature/s | | | | | | | |
| Are you currently or have you previously been under investigation for any matters related to animals owned by you or in | | | | | | | |
| your care by an animal welfare organisation or cat registering body. If so what was the outcome of these investigations? | | | | | | | |
| Yes (Please provided details on | Yes (Please provided details on a sheet at the back of this application) | | | | | | |
| □ No | No | | | | | | |
| Signature/s | | | | | | | |
| Are you currently or have you previously | surrendered any animals owned by you o | or in your care to ANY animal welfaire | | | | | |
| organisation (This DOES NOT include re-homing of rescued cats or re-homing of retired breeding animals. | | | | | | | |
| Yes (Please provided details on | Yes (Please provided details on a sheet at the back of this application) | | | | | | |
| No |] No | | | | | | |
| Signature/s | | | | | | | |
| Are you currently or have you previously been a member of another feline registry or cat control body | | | | | | | |
| Yes (Please provided details) | | | | | | | |
| □ No | | | | | | | |
| | oonses to the above questions or providir | ng false or misleading information may | | | | | |
| render you ineligible to join Cats NSW Ir | | | | | | | |
| | membership applications based on thes | | | | | | |
| This membership application if approved and if applicable is subject to you providing a copy of your letter of resignation | | | | | | | |
| from your current registering body, except in the case of application for associate membership. | | | | | | | |
| Please DO NOT send any payment until your application has been processed (If approved you will be notified of fees required for payment) | | | | | | | |
| Schedule of Fees | | | | | | | |
| Membership type | New: 1 st July to 30 th June | New: 31 st December to 30 th June | | | | | |
| Single | \$50.00 | \$40.00 | | | | | |
| Joint | \$70.00 | \$60.00 | | | | | |
| Family | \$85.00 | \$75.00 | | | | | |
| Junior | \$25.00 | \$15.00 | | | | | |
| Single Pensioner | \$35.00 | \$20.00 | | | | | |
| Joint Pensioner | \$55.00 | \$30.00 | | | | | |
| Associate Member | \$35.00 | \$20.00 | | | | | |
| Joint/Family Associate Member | \$45.00 | \$30.00 | | | | | |
| <u> </u> | , | | | | | | |

| | Payment & Postal Details | | | | |
|--------------------------------|----------------------------------------------------------------------------|---------|--------------------|--|--|
| Please make Cheques | Cats NSW Incorporated | | | | |
| payable to | (Please note cheque payments will not be accepted after the 1st July 2025) | | | | |
| Please pay Direct Debit / EFT | CommBank | | | | |
| (electronic funds transfer) to | BSB: 062572 | | | | |
| | Account No: 10196375 | | | | |
| | Account Name: Cats NSW Incorporated Show & Fundraising Account | | | | |
| Post To | Secretary - Cats NSW Incorporated | | | | |
| | PO Box 478 | | | | |
| | Belconnen | | | | |
| | ACT 2616 | | | | |
| Secretary Email Address | secretary@catsnsw.com.au | Website | www.catsnsw.com.au | | |