

# Australian Flyball Association Inc.

## Application for Affiliation

- Please complete all details and forward with application fee of \$30.00 to:  
Australian Flyball Association Inc.  
PO Box 4179,  
Pitt Town,  
NSW 2756

Organisation: \_\_\_\_\_

Postal Address: \_\_\_\_\_

State: \_\_\_\_\_ P/C: \_\_\_\_\_ Phone: \_\_\_\_\_

Club Flyball Co-Ordinator: \_\_\_\_\_

Address: \_\_\_\_\_

State: \_\_\_\_\_ P/C: \_\_\_\_\_

Phone (h): \_\_\_\_\_ (w): \_\_\_\_\_ (f): \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Affiliation with the AFA must be renewed annually, and is due 30<sup>th</sup> June each year.

**Club Flyball Co-ordinator is the person responsible for co-ordinating flyball activities at your club. If the holder of this position changes the AFA needs to be contacted immediately with the new contact details**

*I/we \_\_\_\_\_ on behalf of the above-mentioned club, hereby apply for affiliation with the Australian Flyball Association Inc. I/we agree to conduct all Flyball activities in line with the rules and regulations of the Australian Flyball Association Inc. I/we understand that the affiliation may be revoked if these rules and regulations are not followed.*

**Signature:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Position:** \_\_\_\_\_

Enclosed is cheque/cash for \$30

### AFA APPROVAL:

\_\_\_\_\_ Date: \_\_\_\_\_  
AFA President

\_\_\_\_\_ Date: \_\_\_\_\_  
AFA Secretary

*AFA Use only:*  
Date Received: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Amount Received: \$ \_\_\_\_\_ Receipt No: \_\_\_\_\_