

# Membership Form



MR/MR/MS/MISS

FIRST NAME

LAST NAME

DATE OF BIRTH (DD/MM/YYYY)

MOBILE PHONE

HOME PHONE

ADDRESS

STATE

ZIPCODE

NAME IN WHICH YOU WISH TO REGISTER STUD

THE ENTITY APPLYING FOR PARTICIPATION (ONLY COMPLETE RELEVANT PART)  
INDIVIDUAL PARTICIPANT:

TITLE

FULL NAMES

SURNAME

COMPANY/CLOSED CORPORATION:

NAME

ACN

TRUST:

NAME

REGISTRATION NUMBER

WRITTEN DESCRIPTION OR DRAWING OF YOUR REGISTERED FIREBRAND, OR ATTACH A COPY OF BRAND  
CERTIFICATE:

# Membership Form



DO YOU AGREE TO HAVING YOUR CONTACT DETAILS MADE AVAILABLE TO OTHER MEMBERS?

YES

NO

FARM NAME REGISTERED ON AGPRO AS GRAZER

HAVE YOU READ AND AGREE TO THE FOLLOWING, PLEASE TICK (FOUND ON WEBSITE WWW.NGUNI.AU)

CONSTITUTION

PRIVACY POLICY

CODE OF CONDUCT

GRIEVANCES AND COMPLAINTS POLICY

SOCIAL MEDIA POLICY

CATTLE WELFARE STANDARDS

SCHEDULE OF FEES

SIGNATURE

DATE



## Nguni Australia

PRESIDENT: EDWIN ROUS  
VICE- PRESIDENT: HENTIE MARTENS  
SECRETARY: KC DECHUAD

☎ 0482839288

🌐 WWW.NGUNI.AU

✉ NGUNI.AUSTRALIA@GMAIL.COM

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📘 NGUNI AUSTRALIA 📷 NGUNI\_AUSTRALIA