



10/1  
**Devon Cattle Breeders Society of Australia Ltd**  
**PO Box 72, Gloucester, NSW, 2422**  
**Phone/fax: (02) 4994 7189**  
**Email: devon@harboursat.com.au**

## APPLICATION FOR MEMBERSHIP

The information collected on this application form is for the purpose of contacting you and promoting your herd and Devons as a breed. The information provided by you to the Society is used to undertake its role in relation to memberships, registrations and transfers, sales, marketing and promotion of Devon cattle and performance recording. By applying to become a member of the Society you consent to allow the Society to use this information for these purposes as well as for publication in Devon newsletters, journals, sale catalogues and the Society web site.

You may choose not to disclose your details by making a written application to the Society.

**Membership Name:**-----

**Name of Nominee (Voting Representative):**-----

**Postal Address:**-----

**Town:**----- **State:**----- **Postcode:**-----

**Phone:**----- **Mobile:**----- **Fax:**-----

**Email:**-----

**Membership Fees** (please tick one)

Full (\$205)    Associate (\$85)    Student (\$33.50)    Junior (\$33.50)

**Student (18–25yrs) and Junior members (U18) – please supply Date of Birth** -----/-----/-----

### APPLICATION FOR STUD PREFIX AND TATTOO (if applicable)      **Fee \$85**

**Stud Prefix:** 1----- 2----- 3-----

*(A Stud Prefix is often chosen from the name of the breeder's property)*

**Tattoo Brand:** 1----- 2----- 3-----

*(The Tattoo Brand is unique to each breeder and consists of 3 characters- often the breeder's initials)*

I/We apply for membership of the Devon Cattle Breeders Society of Australia Ltd and agree to abide and be bound by the Memorandum and Articles of Association and Regulations of the Society. I/We agree to pay forthwith the appropriate subscription and fees. I/We certify that the details shown are correct and that I/we have the appropriate authority to sign this application on behalf of the membership name applied for.

**Signature:**----- **Date:**----- **Total Fee \$**\_\_\_\_\_

*Return this application with enclosed cheque/money order to the address above. Electronic transfer- contact office.*