



## Annual Membership Application

ACT Wildlife welcomes new members. Each new member will be considered at the next committee meeting and there is no guarantee of acceptance.

An applicant must read, accept and abide by the Code of Conduct and Code of Ethics, which covers the acceptable behaviour within the group and acceptable animal welfare code of practice.

Name

Address

Suburb / Town

State

Postcode

Home phone

work phone

mobile

email

Type of Membership: Members caring for wildlife must live in the ACT.

I wish to be a:

Member  \$25 (an active volunteer with ACT Wildlife, individual or family)

Associate  \$50 (members who are supporters or live in other States)

I wish to donate \$.....

Total \$.....

I am, or have been a carer

Which carer organisation? .....

When?.....

I wish to train to become a carer

I wish to volunteer in other capacities

I have / have not attended an orientation / training day run by ACT Wildlife.

I have read the Carers Code of Conduct and Code of Ethics and agree to act in accordance with the Codes

Signature: .....

Date: .....

**Bank Details:** ACT Wildlife Inc. BSB: 633-000 a/c # 151980604

Reference for deposit: **subs - [your surname]** and please email treasurer@actwildlife.net

Office Use Only

New member accepted

Month .....

Year ....

Member has accepted Codes

Member has completed orientation training