

### APPLICATION FOR MEMBERSHIP

Personal Information (Update if changed)		
First name:	Surname:	
Address:		
City/Suburb:	State:	Postcode:
Postal address (if different to above):		
Home phone:	Mobile:	
Work phone:	Occupation:	
Email:		

Wildlife Experience		
Have you previously belonged to any wildlife organisations? If YES, which organisation and for how long?	Yes / No	
Did you hold any committee positions? If YES, please state which position(s) and for what duration?	Yes / No	
Have you attended a training course in the last three years? If YES, type and date of Course (if known)	Yes / No	

Privacy
<ul style="list-style-type: none"> <li>As a member, your personal details will be included on the NARG Membership List, which must be made available to Office of Environment and Heritage as a condition of our license.</li> <li>The Members Contact List is provided for the sole use of NARG members for the rescue, rehabilitation and release of sick, injured and orphaned Native Australian Wildlife. Unauthorised distribution, use and/or disclosure of this information is prohibited.</li> </ul> <p>Members may elect to have any of the following exclusions applied.</p> <p><input type="checkbox"/> Do not include any of my details on the Members' Contact List.</p> <p><b>OR</b> do not include the following (select any that apply)</p> <p><input type="checkbox"/> Do not include address details      <input type="checkbox"/> Do not include email      <input type="checkbox"/> Do not include Phone numbers</p>

Training History			
Species	Trained to rescue	Trained to rehabilitate	Comments
Macropods	<input type="checkbox"/>	<input type="checkbox"/>	
Wombats	<input type="checkbox"/>	<input type="checkbox"/>	
Possums	<input type="checkbox"/>	<input type="checkbox"/>	
Gliders	<input type="checkbox"/>	<input type="checkbox"/>	
Birds	<input type="checkbox"/>	<input type="checkbox"/>	
Lizards	<input type="checkbox"/>	<input type="checkbox"/>	
Freshwater Turtles	<input type="checkbox"/>	<input type="checkbox"/>	
Frogs	<input type="checkbox"/>	<input type="checkbox"/>	
Raptors	<input type="checkbox"/>	<input type="checkbox"/>	
Koalas	<input type="checkbox"/>	<input type="checkbox"/>	
Bats/flying foxes**	<input type="checkbox"/>	<input type="checkbox"/>	
Venomous reptiles	<input type="checkbox"/>	<input type="checkbox"/>	
Snakes	<input type="checkbox"/>	<input type="checkbox"/>	
** Have you been fully vaccinated for Lyssavirus? <input type="checkbox"/> If so, what is your current titre level?			

Membership Fees	
<input type="checkbox"/> <b>Member</b> – a friend, supporter or rescuer/carer, entitled to vote at General Meetings	\$30

I wish to apply for membership of the Native Animal Rescue Group (NARG). I agree to abide by the rules, codes of practice, aims and philosophies of NARG. I also accept that once approved, membership is dependent on payment of an annual membership fee and may be subject to a 6 month probationary period.

Declaration	
<ul style="list-style-type: none"> <li>I declare that the information provided in this application is true and correct. I agree to be bound by the Constitution, rules and policies of NARG while I am a member.</li> <li>I confirm that I have read the relevant documentation relating to NARG and wildlife rehabilitation. I agree to abide by: codes of practice, legislation, rules, regulations, acts, animal welfare protocols, NARG's Constitution, Licence conditions, NARG rules and regulations and the NARG Handbook and Procedures Manual.</li> <li>I am aware I will be in close proximity to native animals during training, rescue, euthanasia, rehabilitation or release. I acknowledge that native animals (including reptiles and birds), can be unpredictable and accidents can occur. Organisers / trainers / NARG or its members are not liable for any accidents or injuries.</li> <li>I will take measures to ensure the safety of myself and others during training, rescues, rehabilitation, and release of native animals. I will follow instructions and adopt safe practices when handling animals. I will not behave in a manner that places anyone in danger.</li> </ul>	
<b>Signature:</b>	<b>Date:</b>

NB: If you submit your application electronically without a signature you are deemed to have agreed to the above conditions.

## Lodgement and Payment Instructions

(No need to return this page with your application)

Select Payment Option	
<input type="checkbox"/> <b>Direct Deposit</b> <ul style="list-style-type: none"> <li>• BSB: <b>032-691</b></li> <li>• Account: <b>275519</b></li> <li>• Account Name: <b>Native Animal Rescue Group</b></li> <li>• Reference: <b>Membership &lt;Your name&gt;</b></li> </ul>	<p>Let us know to expect the payment.</p> <p>Email to <a href="mailto:membership@narg.asn.au">membership@narg.asn.au</a></p> <p>or</p> <p>Phone the Treasurer on <b>0438 434 877</b></p> <p>And provide the following information:</p> <ul style="list-style-type: none"> <li>• Your name</li> <li>• Your address &amp; phone number</li> <li>• This is a membership payment</li> <li>• When and how the payment was/will be made</li> <li>• Any other relevant details</li> </ul>
<input type="checkbox"/> <b>PayPal</b> <ul style="list-style-type: none"> <li>• Australian dollars only</li> <li>• Please add \$2 to cover PayPal fees</li> <li>• Pay to: <a href="mailto:babywombats@gmail.com">babywombats@gmail.com</a></li> <li>• Go to <a href="#">PayPal</a></li> </ul>	
<input type="checkbox"/> <b>Cheque</b> <p style="margin-left: 40px;">Cheques payable to: <b>Native Animal Rescue Group</b></p> <p style="margin-left: 40px;">Include your: <b>Name, Address and phone number</b></p> <p style="margin-left: 40px;">and reference: <b>NARG Membership</b></p> <p style="margin-left: 40px;">Mail to: <b>The Treasurer</b></p> <p style="margin-left: 40px;"><b>Native Animal Rescue Group</b></p> <p style="margin-left: 40px;"><b>PO. Box 2191</b></p> <p style="margin-left: 40px;"><b>Tomerong NSW 2540</b></p>	
Application Lodgement	
<input type="checkbox"/> <b>Mail</b>	<p>Print, complete and sign the application form</p> <p>Mail to: The Secretary Native Animal Rescue Group PO Box 24 Majors Creek NSW 2622</p>
<input type="checkbox"/> <b>Electronically</b>	<p>Please send your completed application to NARG at: <a href="mailto:membership@narg.asn.au">membership@narg.asn.au</a></p>