

Application for **Kindred Affiliation**THE NAVAL ASSOCIATION OF AUSTRALIA

Once Navy, Always Navy.

Organisation/Association Details Name				
Name				
Is the Associa	ation Incorporated	?		
If Incorporate	ed			
In which Stat	e/Territory is it is in	corporated?	Registe	red Number
Number of m	iation Incorporated?			
Contact detai	Is (Please print)			
President				
Name				
Address				
Suburb/City		State	Post Code	Country
Postal Address	s if different to above			
Suburb/City		State	Postcode	Country
Telephone	Home	Work		
	Fax	Mobi	le	
	Email			
Secretary				
Name				
Address				
Suburb/City		State	Post Code	Country
Postal Address	s if different to above			
Suburb/City		State	Postcode	Country
Telephone	Home	Work		
	Fax Mobile			
	Email			
Does your Ass	sociation have a web	page? Do y	ou want to link with the N	NAA Website?
If not do you w	ant page in the NAA	website?		
Application				
Kindred Affiliat	tion to the Naval Asso	ociation of Australia. W	e agree to comply with the	, I hereby apply for ne Constitution and By-laws of the
An application	fee of \$25 is enclose	ed. (See Note 1)		
Signed			Date	
Name in Block	Letter			

Note 1. On receiving approval to become a Kindred Affiliate, the Application Fee becomes the Membership Subscription for the remainder of the calendar year in which the application is approved. Should application be approved in between the dates of 1 November and 31 December, the subscription will be deemed to be the subscription for the following calendar year.