

**QUEENSLAND TARGET SPORTS Inc.**

**2026 ADULT NEW and EXISTING MEMBER AFFILIATION ENROLMENT FORM.**

**(Please circle relevant category above)**

**PLEASE PRINT CLEARLY IN CAPITALS (UPPER CASE) LETTERS.**

**CLUB:** \_\_\_\_\_

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**TITLE: Mr, Mrs, Miss, Ms or other (Please State):** \_\_\_\_\_

**GIVEN NAME:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_

**MIDDLE NAME:** \_\_\_\_\_

**MOBILE:** \_\_\_\_\_

**SURNAME:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_

\_\_\_\_\_

**GENDER:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_ **POST CODE:** \_\_\_\_\_

**POSTAL ADDRESS: (If different from above)**  
\_\_\_\_\_

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**TYPE OF MEMBERSHIP:**

**Adult**

**Non Shooting**

**Concession**

**Family**

**Existing Member Affiliation No (If known)** \_\_\_\_\_

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**By signing this form I acknowledge that I will abide by the following:**

**5.1 I am bound by and must comply with all (NSO/SSO) Policies, including but not limited to, the National Integrity Framework, Anti-Doping Policy, Code of Conduct Policy, Social Media Policy and Membership Policy, which can be found here <https://tra.org.au/integrity/>.**

**5.2 I acknowledge that I am bound by these policies, and it is my responsibility to be familiar with these policies.**

**5.3 A breach of these policies could result in further action being taken, as outlined in the complaints or discipline procedures of the respective policy.**

**MEMBERS SIGNATURE:** \_\_\_\_\_ **DATE JOINED:** \_\_\_\_\_

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