Membership Application

AUSTRALASIAN LIVING HISTORY FEDERATION Mail: PO Box 118, Roseville NSW 20 9

Incorporated in NSW INC9878072.

NOTE: New Applications may take up to 4 weeks for approval. Please return this form and any further information such as images and rules via email to ensure a faster assessment. Please ensure all electronic file titles include your club name.

Name of Applicant (Group Name in full):

Mailing Address:

Contact Person:

Group Contact Email:

Telephone/s:

What culture/time period does your group portray:

Members List

Please use the spreadsheet provided and attach a list of all members, identifying which me]mbers are Primary Members of ALHF (paying their annual insurance fee via your member group) and those members who are already members of other ALHF groups.

Information, Safety & Member's Rules New members must provide:

a copy of any safety guidelines or procedures that apply to their group's activities

- authenticity guidelines and/or rules ٠
- provide any constitution or group rules
- Incorporated Association Documentation (if applicable)
- other information that will help the committee assess your application such as:
 - images of group members and activities
 - > website link
 - > a statement of aims and activities, etc.
 - > any events the group has attended
 - particularly in relation to your member group's commitment to safety and historical accuracy and \geq authenticity in presentation.

The ALHF Safety and Authenticity Guidelines and Principles are available at: www.alhf.org.au or alhf@alhf.org.au



References

Please provide group name, contact and contact details for any current ALHF member group that may act as a referee on behalf of your application:

Or, any other references about the activities and good standing of your group;

Activities

You MUST notify ALHF if you do any activities on a regular basis that area not covered in the description given (see: Activities Covered).

Activities outside the normal scope (please attach additional information if necessary):

Does your group engage in: combat/skirmish manoeuvres; use of firearms AND/OR the use of horses?

Yes No If yes, please specify:

Declaration

I hereby apply on behalf of, of the Australasian Living History Federation Incorporated. I certify that I have been authorised by the said organisation to lodge this application and that in the event of acceptance of membership, pay the required fees and be bound by the Rules and the Code of Conduct of the association for the time being in force and that the group are aware of and agree to their responsibilities listed above as part of ALHF membership.

Name and position held (if any) of applicant:

Date:

Signature: _____

FEES: Group Memberships (only payable upon successful acceptance of application, please refer to member

spreadsheet for fee schedule)

Fees are payable by direct deposit:

Australasian Living History Federation St George Bank BSB: 112879 A/c: 474137199

or by cheque/money order sent to the Secretary or Treasurer at PO Box 118, Roseville NSW 2069

PLEASE ENSURE that any electronic files and e-transactions are identifiable by group name. Please send a confirmation of payment email to <u>alhf@alhf.org.au</u> No receipts will be issued for electronic payments – keep electronic confirmation as proof of payment.