



Monday, 3 August 2015

# APPLICATION FORM

## Vehicle Usage at Field & Game Australia Events

First Name:		Surname:	
Date of Birth:		Member Number:	
Address:			
Town/Suburb:		State:	Postcode:
Reason for Application:			
Documents Attached:			
<input type="checkbox"/> Medical Certificate/Doctor's Letter		<input type="checkbox"/> Disability Pension Card (or copy)	
<input type="checkbox"/> Disability Parking Permit (or copy)		<input type="checkbox"/> Other	
Vehicle Description (include registration plate number if applicable):			
I hereby submit my details and documents for assessment of 'genuine need' for use of the aforementioned vehicle only at Field & Game Australia events. I understand that this eligibility will be reviewed on an annual basis.			
Signed:			Date: