

## APPLICATION FOR MEMBERSHIP NORTHERN TERRITORY CRICKET LTD ACN 653 743 803

Please complete this application for membership of Northern Territory Cricket Ltd (the "Company"). You must give the Company any information affecting it or relating to you that the Company needs, or will need, to consider your application to be a member of the Company.

## **PART A - MEMBER DETAILS**

The Company must retain a register of the details of a member of the Company. Please complete your details below.

MEM	BERSHIP YEAR:	1 October 2025 to 30 September 2026		
MEM	BER TYPE:	☐ Registered Member ☐ Affiliated Club ☐ Dire	ector	
		☐ Affiliated Association ☐ Cricket Committee		
NAN	ΛE:			
(For CI	INATED DELEGATE:  ub, Association or Committee)  DENTIAL / BUSINESS  PRESS:			
EMA	dL:			
CON.	TACT NUMBER:			
PAR1	B – DISCLOSURE QUES	TIONS		
Q1		eived or actual conflicts of interest that would affect your ers relating to the operation of the Company?	Yes	No
	If yes, please provide de	tails:		
Q2	Are you aware of any to act as a member o	matter or circumstance that might affect your suitability f the Company?	Yes	 No
	If yes, please provide de	tails:		

## PART C - MEMBER CONSENT

member of Northern Territory Cricket I	ed in this application is true and correct. If accepted as td, I acknowledge that I have read, understood and agree nern Territory Cricket Ltd and accept the responsibilities	to				
SIGNATURE	DATE					
PART D - MEMBER DELEGATE CONSE	IT (CLUB, ASSOCIATION & COMMITTEE APPLICATIONS ONLY	<b>(</b> )				
declare that the information provided in this application is true and correct. If this membership application is accepted, I acknowledge that I have read, understood and agree to comply with the Constitution of Northern Territory Cricket Ltd and accept the responsibilities of the delegate representing the member.						
SIGNATURE	DATE					
PLEASE RETURN COMPLETED MEME	ERSHIP APPLICATION FORM TO: <a href="mailto:ntcricket@ntcricket.com.au">ntcricket@ntcricket.com.au</a>					
PAYMENT DETA	ILS – APPLICIBLE FOR ALL MEMBERS					

## 

CARD NUMBER:

CARDHOLDER NAME:

EXPIRY DATE:

SIGNATURE:

**DIRECT DEPOSIT PAYMENT** 

MEMBERSHIP FEE: \$10.00

**DIRECT DEPOSIT PAYMENT DETAILS:** Northern Territory Cricket

Commonwealth Bank BSB 065 903

**Account** 1021 7769

REFERENCE: Name of the member (if an individual)

Name of the entity (if a club, association or committee)