

# NT Back Country Hunting 2024 HUNTER ACCREDITATION COURSE ENROLMENT

**PLEASE USE BLOCK CAPITALS & WRITE CLEARLY**

**Personal Details**

Mr/Mrs/Ms      Family Name

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First Name      Other Names

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Email

*(Required to email electronic copy of Accreditation Booklet)*

Date of Birth

	____ / ____ / ____
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**Postal Address**

Flat/Unit/House No.      Street/Road Name

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City/Suburb/Town      State      Postcode

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**Phone Numbers:**

\* ( )      Mobile

\* ( )      Home

( )      Work

*\*At least one is required*

Date of Course:      \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Location of Course:

Enrolment Fee	Total Payment
Fee	\$
	\$ 70 Plus GST \$7

*(Please attach individual BCH Enrolment Forms for each person if payment is for multiple Enrolments and bring with you your firearms licence and, if possible, your Approved Hunting Organisation membership details)*

**Please Note:** no refund for persons who do not attend courses enrolled in.

**Preferred Payment Options (PLEASE DO NOT SEND CASH IF MAILING OR NOT PAYING IN PERSON)**

**Credit Card details**

Please charge my:    Mastercard       Visa

Name on card: \_\_\_\_\_

Card Number:    \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_    Expiry: \_\_\_\_ / \_\_\_\_    (Month/Year)

Amount: \$ \_\_\_\_\_

[Insert total]

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Other Payment Options** (Please make bank cheques payable to Northern Territory Firearms Council)

Bank cheque enclosed     Money order enclosed



**ENQUIRIES TO:**  
 Phone: 08 8947 1682  
 Email: [info@ntfirearms.com.au](mailto:info@ntfirearms.com.au)  
[www.firearms.com.au](http://www.firearms.com.au)  
 P.O. Box 39419, Winnellie. NT 0821

**For Office Use Only**

Date Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Date Processed: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Credit Card Accepted: Yes/No

Email sent with Handbook and information: Yes/No