

Nhill Motor Sports Club Inc.

Postal Address: PO Box 56, Nhill, Vic. 3418

Incorp #A0020467F ABN # 52 384 515 029

2009 Membership Application Form

PLEASE COMPLETE ALL SECTIONS USING BLOCK LETTERS

PERSONAL DETAILS - Primary member for purposes of correspondence (Parent or Guardian for Junior membership)			
Surname:			
First Name			
Street address or P.O. Box:			
Town:		Postcode:	
* Mobile 1:		Tel: Home	
* Mobile 2:		Tel: Business	
* Email			

* Ride days & club updates are sent to members via sms & email.

AMBULANCE COVER:	
IMPORTANT:	It is a condition of membership to the Nhill Motor Sports Club Inc. that all members must have Ambulance Service cover.
Ambulance Member No:	Expiry Date:
or HCC Number:	Expiry Date:

MEMBERSHIP DETAILS: <i>(please tick)</i> membership valid to 31 st December 2009			
<input type="checkbox"/>	Junior	\$50.00	under 16 years
<input type="checkbox"/>	Senior	\$100.00	16 years and over
<input type="checkbox"/>	Family	\$150.00	Parents & Children (U18)
<input type="checkbox"/>	Social	\$10.00	(non competition)

No.	Full Name	Age	Date of birth	First Aid Qualifications <i>(please tick)</i>		
				Yes	No	If Yes, what level ?
1						
2						
3						
4						
5						
6						

OFFICE USE ONLY	Amount:	Payment received by:	Membership No:
Date:	Cash / Chq No.		