

New South Wales Road Racing Club

Membership Application

(ABN: 29 000 339 631 ACN: 000 339 631)



NSWRRC Membership Officer, PO Box 765, Narellan, NSW, 2567

Ph: 0412 909 019 Fax: 02-8079-1181 Email: membership@nswrrc.com.au

Have you been a member before? Yes/No _____ Membership No. #: _____

Title (please circle) Mr Mrs Ms Other _____
First Name _____
Last Name _____
Res. Address _____
Town/Suburb _____
State _____ Postcode _____
Phone (priv) _____ (bus) _____
Mobile _____ (fax) _____
Email _____
Date of Birth _____

I hereby apply for New Membership to the above Club, and agree to abide by all the Regulations governing the Constitution of this Club and by any such amending or additional Regulations as may be implemented by this Club from time to time.

Membership Type

Full Membership \$50 (inc GST) Associate Membership \$50 (inc GST)
Joining Fee of \$25 applies to new Full & Associate memberships (inc GST)

Junior Membership \$10 (inc GST) (Parent/Guardian Consent must be signed)
Joining Fee of \$5 applies to new Junior memberships (inc GST)

Other Car clubs of which you are a member _____
Your specific interests, types of events, etc. _____
(e.g. Supersprints, State Races, National Races, Officiating, Private Practice)

Signature _____ Date _____
Proposer _____ Mem # _____
Seconder _____ Mem # _____

PARENT/ GUARDIAN CONSENT – PERSONS UNDER 18 YEARS OLD

I _____ of [Address] _____ am the parent/ guardian* of the above-named ("the minor") who is under 18 years old. I have read this document and understand its contents, and have explained the contents to the minor. I consent to the minor joining the Club. (* delete non applicable)

Signature _____ Date _____

Please return this application to the Membership Officer with full remittance.

Office Use Only

Payment Received: CHQ MO CASH CC Amount: \$ _____ Date: _____
Membership No: _____ Receipt No: _____
Board approval: _____ Date: _____
Processed By: _____ Date: _____