



APPLICATION FOR MEMBERSHIP

Central North Coast Sporting Car Club

Established 1954

PLEASE COMPLETE ALL INFORMATION CLEARLY

NAME:	
ADDRESS:	
	POST CODE:
DATE OF BIRTH:	
HOME NUMBER:	
MOBILE NUMBER:	
EMAIL ADDRESS:	

RENEWING MEMBER <input type="checkbox"/>	MEMBER NUMBER:
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NEW MEMBER <input type="checkbox"/>	NOMINATED BY:	MEMBER NO:
	SECONDED BY:	MEMBER NO:

SENIOR MEMBER – \$25	<input type="checkbox"/>
JUNIOR MEMBER – \$15 <i>12-18 years of age (may turn 18 throughout the year)</i>	<input type="checkbox"/>

I HAVE AN OFFICIALS LICENCE: <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES, DISCIPLINE/LEVEL:	

Membership Fee must accompany Application for Membership.

- **Cash**
- **Cheque made payable to "Central North Coast Sporting Car Club".**

Completed Forms can be emailed to cncscccevents@gmail.com or mailed to:

Central North Coast Sporting Car Club
PO Box 371
TAREE NSW 2430.

Membership expires on 31st of Decembereachyear.

I agree to abide by the rules of the Constitution of the Central North Coast Sporting Car Club.

I understand that a copy of the Constitution is available from the Club Secretary upon request.

APPLICANT SIGNATURE:		DATE:	
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Parent/Guardian to sign if applicant under 18 years of age.

PARENT/GUARDIAN SIGNATURE:		DATE:	
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OFFICE USE ONLY			
RECEIVED BY:		DATE:	
AMOUNT PAID:		RECEIPT NUMBER:	
MEMBER NUMBER ISSUED:		CARD ISSUED:	