

Office use only Paid	
Membership Card Sent	

## **MEMBERSHIP APPLICATION**

(PLEASE FILL OUT FORM IN BLOCK LETTERS)

Surname:		Fi	irst Name/s:					
Address (Home):								
Address (Post):								
Phone Number:								
Mobile:								
Email Address:								
Date of Birth:/_					Ma	le	Female	
How did you find out a	about the Club?							
Vehicle Rego	Make	Model	<u> </u>	Body Type		Vehi	cle Lic ty	pe
				7,7			Class A	
Year Manufactured	VIN or Chassis No.					404		
						C4C		
(Please attach same det	tails for any additional	vehicles	)			Unli	censed	
Additional Info:								
Please attach a CURRENT p Membership type:  Members who join betwee full years membership fee	Full \$70.00 As	sociate \$3 per pay a	35.00 pro-rata fee of \$3	5.00, any new n	nembers joi	ning aft		
Full members will receive				and following y	real illicidde	u. The	16 15 110 110	IIIIatio
You must be a full financial member to apply for			Account Name			В	Account N	lo.
concessional licensing.  Membership fees current	Membership fees current as of 1/1/2022		Great Southern Classic Car Show Inc			036609 025042		
I hereby apply for <i>member</i> Constitution & Statement		ership of t	the <b>Great Southe</b> r	rn Classic Car Clu	<b>ub Inc</b> and a	gree to	abide by it	S
Signature			_	/	/			