



BENDIGO CAR CLUB Inc

Incorporation Number A 22547V

APPLICATION FOR NEW MEMBERSHIP



Date _____

I _____
(Full name of Applicant)

of _____
(Address)

Post Code _____

Telephone Number: Home _____ Work _____

Mobile _____

E-mail Address _____

Desires to become a member of the BENDIGO CAR CLUB Inc.

In the event of my admission as a member, I agree to be bound by the rules of the Association for the time being in force.

Date of Birth _____ Occupation _____

With _____ (Name of Employer)

Applicants Signature _____

<p>PROPOSER</p> <p>I _____ (Name) nominate the applicant, who is personally known to me, for membership.</p> <p>_____ (Signature)</p> <p>Membership No _____</p>	<p>SECONDER</p> <p>I _____ (Name) nominate the applicant, who is personally known to me, for membership.</p> <p>_____ (Signature)</p> <p>Membership No _____</p>
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JUNIOR MEMBERS If applicant is under the age of 18 years, consent for this applicant must be given by applicant's parent or legal guardian.

Signature of Parent/Guardian _____

MEMBERSHIP TYPE AND FEES		OFFICE USE ONLY	
	Ordinary: \$80*	Date Received _____	
		Fees _____	
	Junior: \$30*	Membership No _____	
	Family: One full membership plus \$20* for each extra member	Card Issued _____	

*12 to 9 months 100% of fee. 9 to 6 months 75% 6 to 3 months 50% 3 to 0 months 25%

(new members only) Membership year is July 1st to June 30th (financial year)

This form is to be returned to: **Membership Secretary, 108 Carolyn Way, Maiden Gully, 3551**