

# 2015 APPLICATION FOR MEMBERSHIP OF ASSOCIATION South Grafton Ex-Services Motorcycle Club Inc.

(Incorporated under the Associations Incorporation Act 1984)



**The goal of this motorcycle club is to foster the sport of motorcycling. Our objectives are to foster junior development and to encourage as many newcomers as possible, to share our resources and experiences to promote safe and pleasurable activities involving all facets and to preserve the sport of motorcycling.**



I, .....  
(full name of applicant)

of (address)..... Postcode.....

Phone:..... Occupation.....

Email (PLEASE PRINT CLEARLY):.....

hereby apply to become a member of the above named incorporated association. 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.....  
Signature of applicant

If under 18 years Parent/Guardian.....

What discipline of Motorcycling are you interested in? ✓Tick the one you are most interested and put an X (cross) next to the ones that also interest you.

- |   |   |  |   |
|---|---|--|---|
| Motocross <input type="checkbox"/>                | Enduro <input type="checkbox"/>             | Speedway <input type="checkbox"/>      | Dirt Track <input type="checkbox"/>         |
| Officiating <input type="checkbox"/>              | Social Road Ride <input type="checkbox"/>   | Dirt drags <input type="checkbox"/>    | Road Racing <input type="checkbox"/>        |
| Trials <input type="checkbox"/>                   | Social Trail Rides <input type="checkbox"/> | Social Aspect <input type="checkbox"/> | Junior Development <input type="checkbox"/> |
| Vintage/Veteran/ Classic <input type="checkbox"/> |   |  |   |

Joining fee \$1 included : Membership Type - **Family \$75**  **Single \$50**  (please tick one)

DIRECT DEPOSIT DETAILS – ANZ BSB No 012 645, Account No 2145 49445 (Please use name or licence number as reference and include payment receipt with membership form)

I,.....a member for the association,  
(full name)  
nominate the applicant, who is personally known to me, for membership of the association.

.....  
**Signature of Proposer** **Date**

I,..... a member for the association,  
(full name)  
second the nomination of the applicant, who is personally known to me, for membership of the association.

.....  
**Signature of Seconder** **Date**

Membership accepted by committee: YES/NO Signature: .....

*Official use only:*

Receipt No.....Affiliation No.....Date.....

Treasurer.....Secretary.....