

HASTINGS SPORTING CAR CLUB Inc.

P.O. Box 1745

Port Macquarie. NSW. 2444

ABN: 18 177 311 061

CLUB MEMBERSHIP APPLICATION/New & Renewal

Personal Details

NAME (Surname) _____

DATE: / /

(First) _____

ADDRESS Street _____

Town _____ State _____ Post Code _____

D.O.B. / /

Contact Details

Contact Phone Numbers

Day _____

Are you able to receive phone calls during work hours Y N

Mobile _____

Other _____

Night _____

Email _____

Emergency Contact Details

Name _____ Contact No. _____

Competiton Details

Do you have a

C.A.M.S. Comp Licence Y N Number _____

AMSAG Comp Licence Y N Number _____

C.A.M.S. Officials Licence Y N Number _____

Club Membership (Annual)

Single Member \$ 10.00

Family Membership \$ 20.00

("Family" means Mother, Father ,Husband, Wife ,Father, Son, Mother, Daughter)

Living at the same address

Club Administration Use Only

Amount: \$ _____ Accepted By: _____ Date: _____ / _____ / _____

Membership Number: #

Card Issued Y N

Expiry Date: