

South Grafton Ex-Services Motorcycle Club



2010 Membership Application

Name.....

Postal Address.....

.....State.....P/Code.....

Telephone (H).....(M).....

Do you have the internet? Yes / No (Please circle one)

E-mail Address.....

Member Details

Name DOB (Jnr Only) MA Licence No

.....

.....

.....

.....

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 you also interest you.

Moto cross Vintage/Veteran/ Classic Speedway Dirt Track

Officiating Social Road Ride Road Racing Trials

Social Trail Rides Social Aspect Junior Development Enduro

Membership Type Family \$30 Single \$20 (please circle one)

As part of being accepted as a member of the South Grafton Ex-Service Motorcycle Club Inc, I agree to abide by the club rules and acknowledge that I will participate in club activities including working bees, monthly meetings and organized club events.

Signed.....

If under 18 years

Parent/Guardian.....

Date.....

Return to : P O Box 451, Grafton NSW 2460.

Official use only:

Receipt No.....Affiliation

No.....Date.....

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

.....