



NAME: .....

ADDRESS: .....

.....

PHONE NUMBER: ..... MOBILE: .....

EMAIL: .....

MEMBERSHIP	PRICE	QUANTITY	AMOUNT
<b>Senior Membership</b>	\$50.00		
<b>Junior Membership</b>	\$25.00		
<b>Social Member</b> <i>No voting rights. Need to be a member to buy insurance</i>	\$25.00		
		<b>TOTAL:</b>	

DIVISION: ..... CAR NO: .....

TRANSPONDER NO: ..... MEMBERSHIP NO: .....

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Please return this form to [registrar@albanyspeedwayclub.com.au](mailto:registrar@albanyspeedwayclub.com.au)

Bank Details: Albany Speedway Club BSB: 036 168 ACC: 14 9786

RECEIPT NUMBER: .....