



MEMBERSHIP APPLICATION/ RENEWAL

arungapark@outlook.com

FULL MEMBERSHIP \$60	JUNIOR MEMBERSHIP \$30	FAMILY MEMBERSHIP \$150
-----------------------------	-------------------------------	--------------------------------

FAMILY NAME _____ FIRST NAME _____ DOB ____/____/____

ADDRESS _____

POSTAL ADDRESS _____

EMAIL ADDRESS _____ PH NUMBER _____

COMPETITORS ONLY

RACE DIVISION/S: _____ AMBULANCE COVER NUMBER _____

NEXT OF KIN : _____ RELATIONSHIP: _____ PH NUMBER: _____

All competitors are required to have St John Ambulance Cover or have adequate Private Health Cover.
Arunga Park Speedway Association will not be responsible for costs incurred by routine or emergency transport to the Hospital.

I AGREE TO ALLOW THE ARUNGA PARK SPEEDWAY ASSOCIATION INC TO DISCLOSE MY PERSONAL DETAILS TO OTHER CLUBS OR ENTITIES FOR THE BENEFIT OR PROMOTION OF THIS CLUB.
UPON ACCEPTANCE OF THIS APPLICATION I AGREE TO UPHOLD THE RULES AS SET OUT IN THE ARUNGA PARK SPEEDWAY ASSOCIATION INC CONSTITUTION AND THE ARUNGA PARK SPEEDWAY ASSOCIATION INC SUPPLEMENTARY RACE RULES AND REGULATIONS.

SIGNATURE OF APPLICANT : _____ DATE : _____

PARENT CONSENT FOR APPLICANTS UNDER 18 YEARS OF AGE

AS THE PARENT / LEGAL GUARDIAN OF _____ I HEREBY AUTHORISE FOR MEMBERSHIP OF THE ARUNGA PARK SPEEDWAY ASSOCIATION INC AND GIVE PERMISSION FOR THEM TO PARTICIPATE IN THE ACTIVITIES OF THE CLUB.

NAME OF PARENT/GUARDIAN : _____ SIGNATURE : _____

ADDRESS : _____ DATE : _____

NEW MEMBER NOMINATED BY : _____ SIGNATURE : _____

NEW MEMBER SECONDED BY : _____ SIGNATURE : _____

PLEASE PROVIDE A PASSPORT SIZE HEADSHOT PHOTO FOR YOUR MEMBERSHIP CARD TO SAM TEBECK AT BATTERY CITY or EMAIL A YOUR PHOTO TO samtebeck@hotmail.com

COMMITTEE USE ONLY

DATE RECEIVED : _____ ACCEPTED AT COMMITTEE MEETING : _____

MEMBERSHIP OFFICER SIGNATURE : _____ MEMBERSHIP # ISSUED : _____

FAMILY MEMBERSHIP

FAMILY MEMBERSHIP CONSISTS OF 2 ADULTS AND ALL CHILDREN UNDER THE AGE OF 16 YEARS
IN THE **IMMEDIATE** FAMILY.

FAMILY NAME	FIRST NAME	DATE OF BIRTH

DIRECT DEBIT

ARUNGA PARK SPEEDWAY ASSOCIATION

WESTPAC

BSB: 035 303

ACCT: 446245

PLEASE PUT YOUR NAME AS THE REFERENCE

Supporting our club.

Our club relies heavily on the generosity of volunteers and members. Please mark in which areas you or your crew can help.

Canteen Work

Sign In

Race Night Officials

Track Preparations

Entry Gate Crew

Push Car Driver

Track Entry Gate Crew

Working Bees

Fundraising activities eg. bbqs