

SOUTH AUCKLAND CAR CLUB

PO Box 5, Drury

MEMBERSHIP FORM

Full Members \$60.00

Junior Members (18 or under) \$30.00

Membership year is August to July.

PERSONAL DETAILS

Name: _____ Male/Female (please circle one)

Address: _____

D.O.B: _____

Phone: (h) _____ Phone: (w) _____

Email _____ Mobile: _____

Drivers Licence No: _____ Expiry date: _____

MOTORSPORT NZ DETAILS

Motorsport NZ Licence No: _____ Expiry date: _____

Licence grade _____

VEHICLE DETAILS

Make: _____ Model: _____

Car Colour: _____ Car Registration: _____

Car Class: _____ Year: _____

Capacity: _____ Log Book No: _____

I agree to abide by all the rules and regulations of the South Auckland Car Club and those governing motorsport in New Zealand. I acknowledge my right to access and correct the above information. This consent is given in accordance with the Privacy Act 1993.

Signed: _____ Date: _____