



PO Box 345 Leederville WA 6903

Office Use only:

Receipt No: _____

Amount: \$ _____

Membership Pak:

Club Sticker:

Membership Card:

Membership Application Form

FULL MEMBER

ASSOCIATE MEMBER

Membership No: # _____

Financial Member Name: _____ DOB: __/__/__.

Address: _____

Email Address: _____

Phone-Home: _____ Mobile: _____

Spouse / Partner Name: _____

Children: _____

Vehicle/s Details

Model: _____ Year: _____ Colour: _____ Rego # _____

Model: _____ Year: _____ Colour: _____ Rego # _____

Model: _____ Year: _____ Colour: _____ Rego # _____

(PLEASE NOTE: club eligible vehicles only)

I am interested in the following activities that I would like to do with the club:

Sprints

Drags

Hill climbs

Car Shows

Go Karting

Cruising

V8 Supercar Events

Other _____

The things I want to get out of this club I am about to join is: _____

I enclose Nomination Fee of \$10.00 and Annual Membership Fee of \$50.00

I agree to abide by the Rules and Regulations of the FPV Tickford Owners Club of WA as detailed in the Clubs Constitution and By Laws that I have read. Please note that in accordance with the club constitution a member has a right to view the club records which includes the Members Register.

I understand that the club points are only allocated to the financial member attending club meetings/events.

Signature: _____ Date: __/__/__.