Lucindale Karting Club - Membership Application

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| **Name:** |  |
| **Address:** |  |
| **Email:** |  |
| **Mobile:** |  |
| **Home phone:** |  |

|  |  |
| --- | --- |
| **Spouse** /**Next of kin** |  |
| **Contact number** |  |

*Enter “N/A” if you are not racing. Leave Race class 2 and 3 blank if you are racing in just one class*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Race Class 1:** |  | Race Class 2? |  | Race class 3? |  |
| **Kart No.:** |  | Kart No.? |  | Kart No? |  |

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Membership Type – please enter “Yes” for **ONE** of the two options

|  |  |  |
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| **Single:** |  | $55.00 |
| **Family:** |  | $70.00 **(only includes children still in study)** |

Other Family Members (for Family Memberships). *Use multiple lines if racing in more than one class.*

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| --- | --- | --- | --- | --- |
| **Name:** | **Racing Class** | **Kart No** | **Date of Birth****(Junior Members ONLY)** | **Age** |
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If there are ANY Junior members, parental consent **MUST** be completed:

I hereby give my child(ren) permission to be a member of the Lucindale Karting Club

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Cheques - make payable to:** | LUCINDALE KARTING CLUB |
| **Direct Deposit details:** | Lucindale Karting ClubBSB: 015670 Account No: 410920758(Please use your AIDKA licence number or name as your reference) |

**Treasurer use only:**

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| --- | --- | --- | --- |
| Received Paid |  / /2021 | Paid by: EFT / Cheque / Cash | Amount Paid $ |
|  |  |  |  |
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