



Maclean Dirt Bike Club Inc
 P O Box 475, Maclean NSW 2463
 Ph: 0402 203 482
www.macleandirtbikeclub.com.au

MEMBERSHIP FORM 2010

_____ | _____
 First Name | Family Name

hereby apply for membership in the Maclean Dirt Bike Club Inc. I understand that if accepted by the club, that I will be bound by their decisions and policies reached by the majority vote of the members. I also realize that membership also involves my participation in the organization of the Club's activities and I promise to assist in this whenever I am called upon to do so. I agree to pay the club membership fees upon acceptance and realise that these become due again on the first day of January of every year.

MEMBERSHIP TYPE

Single \$35 Social \$10 Family \$50

MA Licence Number

First Name

Family Name

Street Address

Suburb/Town

State Postcode

Date of Birth / /

Day Month Year

Phone

Mobile

Occupation

Email

Unless otherwise requested, e-mail address will be used for newsletters & last minute instructions for events.

OTHER FAMILY MEMBERS TO BE INCLUDED

Name

MA Licence Number Date of Birth / /

Name

MA Licence Number Date of Birth / /

Name

MA Licence Number Date of Birth / /

Signature _____ Date / /

Signature of Parent of Guardian if under 18 years of age
 Signature _____ Date / /

Name of Parent/Guardian

OFFICE USE ONLY

Date Received / /

How/Where _____

Affiliation Card No.

Card Issued _____