Wangaratta 4x4 Club Inc

PO Box 494 Wangaratta 3676

Application for Membership

Applicant First Name		Applicant Surname		Date of Birth	
Partner's First Name		Partner's Surname		Date of Birth	
Child 1 First Name		Child 1 Surname		Date of Birth	
Child 2 First Name		Child 2 Surname		Date of Birth	
Child 3 First Name		Child 3 Surname		Date of Birth	

Please attach another page if there are more than three children in your family

Home Address		**Postal Address**	
Home Tel.		Mobile	
Business Tel.		Fax	
Email			

To receive club communications (including newsletters, news, happenings and event information)
please go to the club's website & sign-up. Go to www.wangaratta4x4club.com.au

Skills & qualifications to contribute to the club e.g. First Aid, Chainsaw, Navigation, Mechanical etc.

1.	4.
2.	5.
3.	6.

FEES – Joining fee $20.00 plus Annual Subscription $100.00. Total $120.00
Membership year is 1 July to 30 June the following year

By signing this application:

- I agree to Wangaratta 4WD Club's Constitution, By-Laws and Privacy Policy which can be viewed on the website.
- I give the club permission to use my/my vehicles image for publication in newsletters, newspapers, on the club's website and on club promotional displays. If this condition is not acceptable please ~~strike out~~ this paragraph and contact the Membership Secretary.

Signature: …… Date: ……

Office Use Only

Date Received		Received by who:	
Treas/Sec Date		Remarks	
Proposer		Seconder	