

APPLICATION FOR MEMBERSHIP SUZUKI 4 W.D. CLUB SOUTH AUSTRALIA inc.

New Application:- Renewal:-

Life Member:- Family Membership:-

PRINCIPAL MEMBER
Name:- _____
Address:- _____
Post Code: _____
Date of Birth:- _____
Occupation:- _____
Drivers Licence Number/State _____
Phone (Home):- _____
Phone (Work):- _____
Phone (Mobile):- _____
Fax:- _____
E-Mail Address:- _____

PARTNER
Name:- _____
Address:- _____
Post Code: _____
Date of Birth:- _____
Occupation:- _____
Drivers Licence Number/State _____
Phone (Home):- _____
Phone (Work):- _____
Phone (Mobile):- _____
Fax:- _____
E-Mail Address:- _____

VEHICLE 1 DETAILS
Make:- _____
Model:- _____
Year:- _____ Colour: _____
Registration Number: _____
Ins. Company/Broker: _____
Policy Number: _____
Expiry Date: _____
Indicate the type of Two Way Radio(s) if fitted.
HF: <input type="checkbox"/> UHF: <input type="checkbox"/>
Has vehicle been modified:-
Yes:- <input type="checkbox"/> No:- <input type="checkbox"/>
If so please list the details on the back of this application.

VEHICLE 2 DETAILS
Make:- _____
Model:- _____
Year:- _____ Colour: _____
Registration Number: _____
Ins. Company/Broker: _____
Policy Number: _____
Expiry Date: _____
Indicate the type of Two Way Radio(s) if fitted.
HF: <input type="checkbox"/> UHF: <input type="checkbox"/>
Has vehicle been modified:-
Yes:- <input type="checkbox"/> No:- <input type="checkbox"/>
If so please list the details on the back of this application.

PLEASE NOTE:

1. -A valid Insurance Policy **MUST BE PRODUCED** for all vehicles used on any club activity. At least Third Party Property Insurance is required. Membership will not be granted or renewed unless the insurance Policy **documents are sighted** by the Membership Officer **at the time of joining or renewal**. When the policy is renewed the Membership Officer **MUST** be given a copy of the new Certificate of Insurance.
2. It is the **ONUS** of the member to make sure that there is adequate insurance cover on camper trailers, trailers, caravans and campers used during Club activities.
3. New members will be allocated a Club Radio Call sign (S.C) when membership is approved. Existing members will retain their current club radio call sign upon renewal.
4. The clubs financial year ends 30th June & all renewals to be paid by the **August meeting** Or **another Joining fee will apply**
5. Membership status will not be confirmed until the prescribed fee is paid and proof of insurance has been sighted, Personal History Form signed.
6. **FEES** Joining Fee: **\$20-00** Single Full Member **\$65-00** Family Membership **\$65-00**

Please find attached cash/cheque/ money order to the value of _____ being for joining fees (if required) and membership fees. Signature _____ Date _____
--

How did you find out about the club ? (New members only)

Display. Advertisement- Internet- Another member- (Who _____)
Committee Use Only

Insurance Policy Sighted (Membership Officers Initials) _____
Mailing List Noted/Checked Yes / No. Joining Kit issued _____ Club Sticker _____ Card _____
Key Ring _____ Constitution _____
Check List issued _____ Call Sign Allocated _____
Membership Proposal Accepted Yes/ No. Date of Status: _____ / _____ /20 _____
Receipt Number _____ Treasurers Signature _____

Contact _____ for further information