

NEW MEMBERS APPLICATION FORM

P O Box 16-610, Hornby, Christchurch 8441
admin@canterburycarclub.co.nz

Complete this form and return to the above address with the appropriate fee.
Your application will be tabled at the next Management Committee meeting for approval.

NAME First..... Last.....
Known As Date of Birth/...../..... Gender: Male / Female / Other

CONTACT DETAILS:

Postal Address Suburb.....
City Postcode.....
Home phone..... Work phone.....
Mobile Occupation
Email*
Emergency Contact person and their ph#:

*Please include your email address to be added to the mailing list for important club news and regular bulletins. Your details will not be passed on to other parties.

DECLARATION: I agree to abide by and be bound by the Constitution, By-laws, Rules and Policy of the Canterbury Car Club Inc. if this application to become a member is granted. I declare that this information supplied by me is true and correct and I consent to the collection, retention, use and disclosure of it by the Canterbury Car Club Inc. for the lawful activities of the Club. My consent is given in accordance with the Privacy Act 2020.

Signature Date

Fee enclosed \$..... Please refer to payment options below

Payment options; cash at the office, Credit Card payments in person or over the phone only.

Internet bank transfer payments to: Canterbury Car Club. 02 0865 0020166 25

(please use your name and 'membership' as reference)

Membership Fee (all members)

\$70 including GST

Membership is valid for one year



Office use only		
Membership No	Paid by:	Processed Date
	Cash Bank Transfer Eftpos Credit Card	