

2019 MEMBERSHIP APPLICATION

MEMBERSHIP FEE: \$35.00 per person



To confirm your Membership Application please return the completed form and pay the total amount due. Applications will only be processed upon receipt of payment.

PO BOX 192
ROCKHAMPTON QLD 4700
www.rockyamateurs.org.au

NOMINEE

Name: _____

Postal address: _____

Telephone: (W) _____ (H) _____

Mobile: _____

Email: _____

I hereby wish to make an application for 2018/19 Membership to the Central Queensland Amateur Racing Club Incorporated and I agree to be bound by the rules of the club.

Signature: _____ Date _____

Proposer: (name and signature) _____

Secunder: (name and signature) _____

TOTAL AMOUNT DUE: \$ _____

TO COMPLETE YOUR MEMBERSHIP APPLICATION:

Email or post your completed form and pay the total amount due:

Post:

The Secretary

CQARC Inc.

PO Box 192

Rockhampton Qld 4700

Email: anne@reidindustrygroup.com.au

Direct deposit:

When paying by direct deposit please use your first initial and surname as your payment reference.

Bank: NAB

BSB: 084 901

Account no: 50 891 5711

Note: All nominations must be proposed and seconded by existing members of the CQARC Inc.