***Membership Application Form***

***Contact Details***

Family Name:

Given Name:

Address:

Date of Birth: / /

Occupation:

***Phone Numbers:***

Work Home Mobile

Email

Membership $100 (Until June 30th)

Total Due $100:

Members Signature Date: / /

(Acceptance of the Terms and Conditions of the Constitution of the Unique Motoring Car Club – Copy available on request)

Club Registration Vehicle Details (Applicant to complete)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Year* | *Make* | *Model* | *Body Type* | *Colour* |
|  |  |  |  |  |
| ***Car Rego*** |
|  |