



Z CAR CLUB OF SYDNEY Inc. MEMBERSHIP FORM 2010

Name :		D.O.B:	
Address:			
Suburb:		State:	P/Code:
Home Phone:		Mobile:	
Email Address:		Current Member No.:	
Please List Any Special Interests: (Motor Sport, Club Runs or other)			

Model:		Rego No:		Colour:	
Engine No.:		Chassis No:			
Standard: (Please Circle)	YES	NO	Modifications:		
Any Other Details or Information:					

Please tick this box if you would like to have your name & contact details submitted in the magazine for the interest of other members.

Full Membership: \$60	<input type="checkbox"/>	Associate Membership: \$10 <small>* Only applies to family of member</small>	<input type="checkbox"/>
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PLEASE COMPLETE FORM AND POST CHEQUE/MONEY ORDER TO:

Z CAR CLUB SYDNEY Inc.
PO Box 651, Lidcombe NSW 1825

Or DIRECT DEPOSIT TO:

Bank: ANZ A/C Name: Z CAR CLUB SYDNEY Inc.

BSB: 012 559 A/C No: 2575-48477

* Please include your Initials & Membership No. in the reference section or for new members put your Initials & New

* Please Post or Email Form with confirmation of payment

OFFICE USE

Date Received: ___/___/___	Receipt No:	Membership No:
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