



Office use only

Paid

Membership Card Sent

MEMBERSHIP APPLICATION / RENEWAL
(PLEASE FILL OUT FORM IN BLOCK LETTERS)

Surname: _____ First Name/s _____

Address (Home): _____

Address (Post): _____

Phone Number: _____

Mobile: _____

Email Address: _____

Membership Number: _____ Date of Birth ____ / ____ / ____ Male / Female

How did you find out about the Club? _____

Vehicle	Rego #	Model	Body	Engine	Transmission	Vehicle Lic Type
		Standard	Sedan		Manual	Full
		Special	Wagon		Auto	404
		Premier	Ute			C4C
		Other	Van			Unlic

Additional Info: _____

Vehicle	Rego #	Model	Body	Engine	Transmission	Vehicle Lic Type
		Standard	Sedan		Manual	Full
		Special	Wagon		Auto	404
		Premier	Ute			C4C
		Other	Van			Unlic

Additional Info: _____

Vehicle	Rego #	Model	Body	Engine	Transmission	Vehicle Lic Type
		Standard	Sedan		Manual	Full
		Special	Wagon		Auto	404
		Premier	Ute			C4C
		Other	Van			Unlic

Additional Info: _____

Please enclose a CURRENT photo of the vehicle/s and /or email to secretary@ehcarclubwa.org.au

(Please circle appropriate type)

Membership type: Full \$70.00 Family \$100 Associate \$35:00

Membership fees current as of 1/3/2021

I hereby apply for membership / renewal of membership for the EH Holden Car Club of WA Inc and agree to abide by the Constitution & Statement of Purpose.

Signature

_____/_____/_____
Date