



APPLICATION FOR MEMBERSHIP OF THE 944 CHALLENGE RACING ASSOCIATION Inc.

I, _____,
(Name)

wish to become a member of the 944 Racing Association Inc. Upon acceptance of this application as a member, I agree to be bound by the rules of the Association for the period they are enforced.

Signature of Applicant

Date

I, _____,
(Name) a member of the Association, nominate the applicant, who is personally known to me, for membership of the Association.

Signature of Applicant

Date

I, _____,
(Name)

a member of the Association, second the nomination of the applicant, who is personally know to me, for membership of the Association.

Signature of Applicant

Date

Applicant's Details:

Postal address: _____

e-mail address: _____

Mob: _____ **AH:** _____ **BH:** _____

Membership Fee: \$200.00 Paid By:

- Cheque:** Payable to: 944 Racing Association Inc
 Cash:
 Direct Deposit: BSB 033 180 Account No: 151332

Mail: 944 Racing Association, c/o 18 Ficinia Mews, Highton Vic. 3216 e-mail:
mtaubitz@gorell.com.au