

# **ROVER CAR CLUB OF SOUTH AUSTRALIA Inc.**

PO BOX 1127 BLACKWOOD SA 5051

# **NEW MEMBERSHIP APPLICATION**

Name:	Birthday & Month/						
Address							
'Phone & Email	Phone:		Email:				
My Nominated member	Birthday & Month /						
Relationship to member		(0		- f.:			
Address		<u>(Sp</u>	ouse, partner, son, daughter	r, friend, etc)			
'Phone & Email	Phone:		Email:				
nsurance details – Appli	cant to comp	lete					
Vehicle Year & Model	Reg. No. Insura		ce Co. & Policy No.	Ins. Type	Expiry date		
declare the correctness party property damage in RCCSA events.  understand I may not party agree that my factory presently and in the details may be made available.	of listed insusurance policarticipate in Remily and I shafuture. I also	urance deta cies on ead RCCSA evel all abide by agree that	ch and every vehicle to the nts with uninsured ve to the rules of the RCC my name, phone nur	o be used in co hicles. SA as may be p	onjunction with		
enclose my membership	o subscriptio	n of \$55.00					
Signature:				)ate			
Office use only	Memb	er No:		Receipt no:			
Date received:				Database	entry: Y/N		

## **Payment Options**

You can pay your membership application and joining fee by any one of the following methods.

### Cheque:

Please make these payable to the "Rover Car Club of SA Inc." Then send it and the completed form (overleaf) by mail to

Rover Car Club of SA Membership officer 6 Laura St SA 5091

**Bank Transfer: Our preferred option** 

BSB No. 065 000 Account No. 00904432

Account Name: Rover Car Club of SA Inc.

When making a transfer PLEASE record your surname in the reference so we know who paid the membership application and joining fees.

The completed form should be scanned and e-mailed to

stevegwilliams@hotmail.com

### Insurance details (cont.) - applicant to complete

Vehicle Year & Model	Reg. No.	Insurance Co. & Policy No.	Ins. Type	Expiry date