



GOLDEN OLDIES TRUCK CLUB Inc

APPLICATION FOR MEMBERSHIP / RENEWAL

Name of Applicant:

Title.....Given Name.....Surname.....

Preferred Name.....

Spouse / Partner's name.....include on label (yes / no)

Address.....

.....

.....State.....Postcode.....

Mailing Address if different.....

.....

Phone: Home:.....Bus.....Fax.....

Mobile.....Email.....

Vehicle typeRego with our Club

Referred to Golden Oldies Truck Club by:

Do you wish to receive monthly newsletters by: Post mail
Email (make sure your email address is above)

If admitted as a member I agree to be bound by the Rules of the club. I acknowledge that my preferred name, surname, and home phone numbers will be used in the membership list which will be distributed to members only.

I request that the following numbers are NOT distributed to members: home bus mobile fax email (please circle)

Signature of Applicant: Date:

MAIL WITH CHEQUE OR POSTAL ORDER TO THE VALUE OF \$50 TO:

The Secretary,
Golden Oldies Truck Club
PO Box 1948
Dubbo NSW 2830

DIRECT DEPOSIT DETAILS IF REQUIRED:

BSB: 062 534 ACCOUNT NO: 1037 6700 ****Please leave surname as reference****

OFFICIAL USE ONLY

Application received on Chq No..... Deposit rec'd on.....

Membership No:.....Financial to.....Receipt No.....

Card sent..... Cheque Details.....Initials of Secretary.....