

# MEMBERSHIP APPLICATION

## N.S.W. MicroSprint Club Inc.

**Name:** .....

**Address:** .....

.....**Post Code**.....

**Email:** .....

**Contact#:**.....**Mobile:** .....

Please cross the appropriate below.

**Full membership (Owner/Owner Driver/Driver) .....**  **\$75**

(Includes \$10 National Affiliation Fee)

**Car# Registration .....**  **\$ 5**

**Associate Membership.....**  **\$35**

### DRIVER INFORMATION

**Racing number: 1st choice..... 2nd choice..... 3rd choice.....**

**Chassis.....**

**Sponsor's.....**

.....

**Engine (manufacturer and style).....**

#### Office use only.

Membership level: .....

Membership #: .....

Date Paid: .....

Receipt #: .....