

MEMBERSHIP APPLICATION

N.S.W. MicroSprint Club Inc.

Name:

Address:

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

Email:

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

Please circle the appropriate below.

Full membership (Owner/Owner Driver/Driver) **\$80**
(Includes \$10 National Affiliation Fee)

Car# Registration **\$5**

Associate Membership..... **\$1**

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 #: