



MEMBERSHIP APPLICATION

Applicants must attend a General Meeting of the Club before an application can be processed

Full membership may be granted to an applicant and family partner who owns a car manufactured 30 or more years ago. Membership entitles members to use of all club facilities, the monthly newsletter 'Crankhandle News' and participation in all club activities. You will become financial and entitled to all the advantages of membership on payment of a **\$30.00 joining fee** and an **annual subscription of \$35.00**. Membership is from 1 July to 30 June each year. Applicants joining in the second half of the year (i.e. after 1 January) pay the joining fee and half the annual subscription. Those joining after 1 April pay the joining fee and full annual fee will be financial until 30 June the following year.

Applicant details

Name _____ Spouse/partner _____

Address

Residential _____

Postal _____

E-mail _____

Occupation:

Member _____ Spouse/partner _____

Contact numbers

Home _____ Business _____ Mobile _____

Vehicle Details

Vehicles: List of details of all vehicles

Condition: indicate for each vehicle: Unrestored (U), Being Restored (BR), Restored(R), Original (O)

Type of Registration: Please indicate for each registered vehicle if Full (F) or Concession (C)

| Year | Make | Model | Body Style | Condition | Reg. No. | Type Reg. |
|------|------|-------|------------|-----------|----------|-----------|
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1. In applying for and being accepted as a member of the Gold Coast Antique Auto Club Inc. I hereby agree to abide by the Rules of this association.
2. I also state that if I apply for Special Interest Vehicle Registration (concessional registration) and have my vehicles dated by the authorised officer of the above club, I shall abide by the conditions of the use of this vehicle as required by Queensland Transport.
3. I shall also endeavour to attend at least three (3) monthly meetings or three (3) club runs each year and any other club event as requested by the Management Committee.

Signature of applicant: _____ Date of application: _____

Proposed by: _____ Seconded by: _____

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|-----------------|--------------------------|-------|----------------------|
| Approved | <input type="checkbox"/> | Date: | Chairman's signature |
| Rejected | <input type="checkbox"/> | Date: | Chairman's signature |