

South West Drag Racing Association



PO Box 1034 ROMA QLD 4455 www.swdra.hwy54.com.au

2018 MEMBERSHIP APPLICATION

		o become financ				ssociation Inc	
RESIDENTIAL ADDRESS:		(No. & Street)					
		(Town)	(P/Code)				
POSTAL ADDR	ESS:						
DUONE.	/Hama\	(Town)				_ (P/Code)	
						k)	
EMAIL ADDRESS:							
	☐ Driver/Rider Membership						
(\checkmark) Tick if Applicable: \Box I wish to receive a copy of the Minutes of Club meetings by POST							
☐ I wish to receive a copy of the Minutes of Club meetings by EMAIL							
	[I DO want to r	eceive notificat	ions of Club me	eetings (by text	unless otherwise stated)	
\square I DO NOT want to receive notifications of Club meetings							
FEES:	FAMILY	MEMBERSHIP (u	p to 2 adults inc	cl children*)	\$40.00		
	SINGLE	MEMBERSHIP			\$25.00		
*NB: For the purposes of membership, "children" are those under the age of 18 years							
PAYMENT METHOD: Cheque (payable to SWDRA) attached AMOUNT:							
		Cash					
Office Use:	Receipt N	lumber:		De	ate:	Initials	