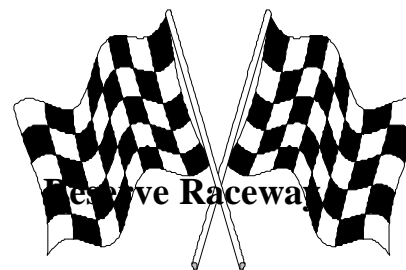


# Millmerran Auto Club Inc.

PO Box 5 Brookstead Q 4364



## APPLICATION OF MEMBERSHIP

Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Postcode: \_\_\_\_\_  
Telephone: \_\_\_\_\_ (Home) \_\_\_\_\_ (Work)  
\_\_\_\_\_ (Mobile) \_\_\_\_\_ (Fax)  
Email: \_\_\_\_\_

### ANNUAL FEES:

Junior Membership	\$ 20.00	\$ _____
Full Membership	\$ 30.00	\$ _____
<b>TOTAL FEES:</b>		<b>\$ _____</b>

### FAMILY MEMBERS:

Spouse: \_\_\_\_\_ 3. \_\_\_\_\_  
1. \_\_\_\_\_ 4. \_\_\_\_\_  
2. \_\_\_\_\_ 5. \_\_\_\_\_

I/We the above named hereby make application to the MILLMERRAN AUTO CLUB INC. for membership.  
I/We understand that the application does not guarantee membership.  
I/We agree to be bound by the rules of the constitution of the MILLMERRAN AUTO CLUB INC. if accepted for membership.

Signature of Applicant: \_\_\_\_\_ Date:        /        /

Nominated by: \_\_\_\_\_ Signature: \_\_\_\_\_

Date Received:        /        /        Fee Received:    Yes / No        Receipt No: \_\_\_\_\_

Membership Passed:    Yes / No        Date:        /        /        Membership No: \_\_\_\_\_