



ANNUAL MEMBERSHIP APPLICATION 2022

MEMBER DETAILS

NEW MEMBERSHIP MEMBERSHIP RENEWAL

Full Name:		Member No (if known):
Date of birth:	Phone:	Mobile:
Current address:		
Suburb:	State:	Post Code:
Email Address:		CAMS License Number(if known):
CAMS Officials License: (please state type of License held)		
Occupation:	Vehicle:	

**NEW MEMBERS ONLY

Proposed by Name:	Signature:
Seconded by Name:	Signature:

**Proposer and seconder must be financial members of the MSCT

EMERGENCY CONTACT (ALL MEMBERS TO COMPLETE)

Name:		
Address:		Phone:
City:	State:	Post Code:
Relationship:		

MEMBERSHIP TYPE REQUESTED

**Please note family membership covers 2 adults and up to 2 children

FULL (\$50.00) FAMILY (\$70) JUNIOR (\$15) AGE 12-17

SPOUSE DETAILS (FOR FAMILY MEMBERSHIP)

Name:		
Date of birth:	CAMS License Number:	Phone:

CHILDREN'S DETAILS (FOR FAMILY MEMBERSHIP)

Name:	Date of Birth:	CAMS License Number:
Name:	Date of Birth:	CAMS License Number:

Main Competition Interests: Motorkhana Khanacross Rally Rallysprint Speed Events

SIGNATURES

I hereby agree to comply with the rules and regulations of the Motor Sports Club of Tasmania Inc.

Signature of applicant:	Date:
Signature of spouse: <i>(only if for a family membership):</i>	Date:

PAYMENT METHOD

<input type="checkbox"/> Direct Deposit Commonwealth Bank BSB 067-003 Account: 28063934 Please use Reference: MS22(along with your surname and first initial) e.g. MS22SmithJ	Motor Sports Club of Tasmania Inc PO BOX 1206, Launceston 7250 membership@msct.com.au
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------