



KYNETON & HANGING ROCK RACING

# KHRRC MEMBERSHIP APPLICATION FORM 2010/2011 SEASON

Tax Invoice ABN 54 624 437 411

## Applicant Details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth (*optional*): \_\_\_\_\_

Occupation: \_\_\_\_\_

## MEMBERSHIP

I wish to become a **Member** of *Kyneton & Hanging Rock Racing*  
(includes guest pass)  
for \$110.00 including GST

## PAYMENT OPTIONS

Enclosed is my payment by (*please tick*): NB: Cards will be sent once payment has been processed

CHEQUE     BANKCARD     MASTERCARD     VISA     AMOUNT \$ \_\_\_\_\_

Please make **Cheques** payable to Kyneton & Hanging Rock Racing Club

For Credit Card Payments *only* please complete:

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ / \_\_\_\_\_

**PLEASE COMPLETE AND POST OR FAX THIS FORM TO:**  
Kyneton & Hanging Rock Racing, PO Box 106, Kyneton VIC 3444  
Telephone: (03) 5422 1866 Fax: (03) 5422 2434

OFFICE USE ONLY:

APPLICATION RECEIVED: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_    CARD #S ISSUED: \_\_\_\_\_    CARDS SENT: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_