

# *KAIKOURA STOCK CAR CLUB*

## Membership / Licence Application Form

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Medical Condition (if any) \_\_\_\_\_

Membership / Licence Fee \$30.00

**PAYMENT: CHEQUE OR CASH ONLY. (PLEASE DO NOT SEND CASH VIA MAIL)**

**Post to:**  
Kaikoura Stock Car Club.  
PO Box 51.  
Kaikoura.

**Make cheques payable to: Kaikoura Stock Car Club**

Please circle your racing class from the following options:

**Classes :**  
Stockcars  
Streetstocks  
A Grade Saloons  
B Grade Saloons  
C Grade Saloons

**I UNDERSTAND THAT I HAVE TO FOLLOW CLUB RULES AS OUTLINED IN THE RULE BOOK.**  
(WHICH WILL BE POSTED WITH YOUR MEMBERSHIP CARD.)

Signed \_\_\_\_\_ Date \_\_\_\_\_