

# American Muscle Car Club of Australia Inc

## Application for Membership / Renewal

Your Name: .....

Partners Name: .....

Address: .....

.....Post Code: .....

Birthday (Optional): .....

Phone: .....Mobile: .....

Email Address: .....

Vehicle: Make: .....Rego Number: .....

Model: .....Style: .....

Colour: .....Year of Manufacture: .....

Modifications: .....

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**I agree to follow all club rules as published;**

Signed: .....Date: .....

Membership Period 1<sup>st</sup> November to 31<sup>st</sup> October

Annual Fee Paid \$50: .....Receipt Number:.....

Signature of Secretary of American Muscle Car Club of Australia

.....Date:.....

Postal Address: P.O. Box 18, Moorebank NSW 1875