

BUSSELTON KART CLUB INC

2024 Membership Form

SURNAME:				
ADDRESS:				
CITY:		STATE:		POSTCODE:
PHONE:		EMAIL:		
NAME:	DOB:	MEMBER TYPE:	Senior <input type="checkbox"/> Junior <input type="checkbox"/> Family <input type="checkbox"/> Associate <input type="checkbox"/>	KART No.
NAME:	DOB:	MEMBER TYPE:	Senior <input type="checkbox"/> Junior <input type="checkbox"/> Family <input type="checkbox"/> Associate <input type="checkbox"/>	KART No.
NAME:	DOB:	MEMBER TYPE:	Senior <input type="checkbox"/> Junior <input type="checkbox"/> Family <input type="checkbox"/> Associate <input type="checkbox"/>	KART No.
NAME:	DOB:	MEMBER TYPE:	Senior <input type="checkbox"/> Junior <input type="checkbox"/> Family <input type="checkbox"/> Associate <input type="checkbox"/>	KART No.
NAME:	DOB:	MEMBER TYPE:	Senior <input type="checkbox"/> Junior <input type="checkbox"/> Family <input type="checkbox"/> Associate <input type="checkbox"/>	KART No.

Please Note: New Members must be Nominated and Seconded by financial Busselton Kart Club members prior to presenting this application to the committee.

NOMINATED BY:		SECONDED BY:	
	SENIOR		\$50.00
	JUNIOR (17 years and younger)		\$25.00
	FAMILY (2 senior and children living at same dwelling)		\$75.00
	ASSOCIATE (non racing member)		\$25.00
PLEASE NOTE THAT THE FEES ARE FOR CLUB MEMBERSHIP ONLY, AND DO NOT INCLUDE AIDKA LICENCE FEES			TOTAL PAYABLE
			\$

Club fees are to be made by Direct Deposit as per the details listed below:
BSB: 633-000 Account Number: 181180258 Account Name: Busselton Kart Club

PLEASE RETURN YOUR COMPLETED MEMBERSHIP APPLICATION FORM ALONG WITH A SIGNED CODE OF CONDUCT FORM FOR EACH MEMBER ON THE APPLICATION, FOR COMMITTEE ENDORSEMENT, TO:

Licensing Secretary
Busselton Kart Club
PO Box 895
Busselton WA 6280

or email to licensing@busseltonkartclub.net.au

Payment Details (Official Use Only)		
Date Received	Paid	Receiving Officer
Committee Review (New Memberships Only)		
Date	Application Result	Date Applicant Notified