

# BUSSELTON KART CLUB INC

## 2025 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:	
	<b>SENIOR</b>		<b>\$50.00</b>
	<b>JUNIOR (17 years and younger)</b>		<b>\$25.00</b>
	<b>FAMILY (2 senior and children living at same dwelling)</b>		<b>\$75.00</b>
	<b>ASSOCIATE (non-racing member)</b>		<b>\$25.00</b>
	<b>PIT BAY FEE - SHELTERED</b>		<b>\$10.00</b>
	<b>PIT BAY FEE - UNSHELTERED</b>		<b>\$5.00</b>
PLEASE NOTE THAT THE FEES ARE FOR CLUB MEMBERSHIP ONLY, AND DO NOT INCLUDE AIDKA LICENCE FEES			<b>TOTAL PAYABLE</b>
			<b>\$</b>

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  
[licensing@busseltonkartclub.net.au](mailto: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