Hills Offroad RC Club Application for Annual Membership 2019

Name:			
Address:			
Suburb:	Postc	ode:	
Phone:	RC Tech Usern	name:	
Email address:			
For family membership, write nam	es of other applicants below:		
I wish to apply for full yearly member constitution, race rules and regulat	pership of the Hills Offroad RC Club ations of the club.	and I agree to abide by the	
Signed:	Date:		
Fees for One Year: Circle One			
Adult (18 years and over) \$15	Junior (under 18 years) \$10	Family \$25	
If you wish to pay by EFT, please us Hills Offroad RC Club BSB: 062-401 Account: 1032 171		and deposit to the following account:	
Club Use Only			
Payment Received by:	(name o	of committee member)	
Amount: Pay	yment Method:	Date Received:	
Detach and give to member			
Receipt for Member			
\$ was received on _	(date) via	(payment method)	
From:		(member's name)	
by Hills Offroad RC Club for memb	ership of the club for 2019.		