

Membership 2025 – 2026 Season.

Name:		Date of Bir	th:		
Address:					
	Post Code:				
Home Phone:	Mobile:				
Nork Phone:	Email:				
Occupation:					
	ou a life member? YES / NO Would you prefer to get information via email or post? EMAIL / POST (circle one)				
For emergency/medical purposes only					
Next of Kin					
Contact number for Next of Kin					
Allergies/Medical Conditions			-		
Class:		Car	Number:		
		Cai	Number.		
Please fill in the name and add	ress of other fa	amily members that	will be under your membership.		
Name:		-			
DOB:	 	DOB:			
Class: Car No:			 Car No:		
					
Name:		Name:			
OOB:		DOB:			
Class: Car No: _	· · · · · · · · · · · · · · · · · · ·		Car No:		
I hereby abide by the Rules and Regulations and	the By-Laws of	Drouin Speedway Inc	and Social Media Code of Conduct.		
Signed No. 1					
Signed No. 2					
Membership Fees		Bank Details for D	Prouin Speedway Inc		
Family (2 Adults & 2 Children Under 10	6) \$80	BSB: 633 000			
Principle Member	\$60	Account Number:	1591 03043		
Spouse/Pensioner/Under 16	\$10	Please ensure yo	u put your name as the reference and send		
Openios, 1 citoticite, 4 citate 20	7-0	а сору о	f the remittance to the Secretary.		
	Drouin Speedwa	ay Club Reg No A5152	2		
Please return by post or email to: The	Secretary P.O	Box 408 Drouin VI	C 3818 or drouinspeedway@gmail.com		
	Off:	as use only			

	Office use only				
Date paid	CASH / CHQ/ EFT	Total paid			
Receipt number	Date licence forms sent				
Membership number					