

[www.heaven-vintagemx.com](http://www.heaven-vintagemx.com)

APPLICATION FOR MEMBERSHIP OF HEAVEN VMX INC.

Incorporated under the Associations Incorporation Act 1984

FIRST NAME: \_\_\_\_\_ FAMILY NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

SUBURB: \_\_\_\_\_ STATE: \_\_\_\_\_ POSTCODE: \_\_\_\_\_

HOME PHONE:( ) \_\_\_\_\_ MOBILE: \_\_\_\_\_ WORK PH: \_\_\_\_\_

JOB: \_\_\_\_\_ D.O.B: \_\_\_\_\_ MNSW RACE LIC No \_\_\_\_\_

EMAIL: \_\_\_\_\_

PREFERRED RACE No  2<sup>ND</sup> OPTION

Please list the types of bikes you own: (If insufficient space please use overleaf)

BIKE	MODEL	YEAR	CLASS
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I hereby apply to become a member of Heaven VMX Inc. and agree to be bound by the rules of the association. I am also aware that being a member of Heaven VMX Inc I have a responsibility when requested to avail myself at some time through the year to be involved in or assist with the running of a race meeting.

**SIGNATURE:**  **DATE:**

Each prospective member must be seconded by an existing financial member and approved by the committee. Please fill out the section below outlining experience that you may have had or possess that could be of benefit to the club.

- Examples:** a) Hold a motor vehicle repairers licence b) Hold any Motorcycling Australia official status.  
c) Previous experience at running a race meeting, catering, or hold a first aid qualification.

Senior Membership \$30.00

Family Membership \$40.00  (please tick membership choice)

Please list below family members names and date of birth:

**Name** \_\_\_\_\_ **D.O.B** \_\_\_ / \_\_\_ / \_\_\_

**Name** \_\_\_\_\_ **D.O.B** \_\_\_ / \_\_\_ / \_\_\_

**Name** \_\_\_\_\_ **D.O.B** \_\_\_ / \_\_\_ / \_\_\_

Seconder: Full Name  Signature

Approved by Secretary  Committee

**Please make payment payable to Heaven VMX Inc**

Mail to: The Secretary  
Heaven VMX Inc.  
PO BOX 188  
MILPERRA  
NSW 2214