

THE AMERICAN CAR CLUB OF AUSTRALIA Inc.



PO BOX 847 DICKSON ACT 2602

WEBSITE: americancarclub.net

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MEMBERSHIP APPLICATION FORM 2022/3

ANNUAL MEMBERSHIP FEES

\$75 PAYABLE BY JUNE 30TH

NEW MEMBERSHIP

MEMBERSHIP RENEWAL

I _____ (Name)

OF _____ (Street)

TOWN/SUBURB _____ STATE _____ POST CODE _____

PHONE

HOME _____ WORK _____ MOBILE _____

EMAIL ADDRESS

Hereby apply for membership of THE AMERICAN CAR CLUB OF AUSTRALIA Inc.
By my signature I agree to abide by the ACCA CONSTITUTION, all other ACCA
rules and also the rules governing the CRS, when applicable.

Signature _____ Date _____

Names of partner/family members where applicable

CAR DETAILS

Make _____ Model _____

Year _____ Colour _____

Registration Number _____ Condition Code _____

(CONDITION CODES OVER PAGE)

A PHOTOGRAPH IS REQUIRED FOR CLUB RECORDS _____

MEMBERSHIP DETAILS

DATE _____ RECEIPT NO _____ MEMBERSHIP NO _____

Secoded by _____

DATE

Nominated by _____

PLEASE PRINT CLEARLY

NEW MEMBERS:

DETAILS OF ADDITIONAL CAR

Make _____ **Model** _____

Year _____ **Colour** _____

Registration Number _____ **Condition Code** _____

Make _____ **Model** _____

Year _____ **Colour** _____

Registration Number _____ **Condition Code** _____

Make _____ **Model** _____

Year _____ **Colour** _____

Registration Number _____ **Condition Code** _____

CONDITION CODE.

REGISTERED ORIGINAL _____ RO

REGISTERED RESTORED _____ RR

UNREGISTERED ORIGINAL' _____ URO

UNDER RESTORATION _____ UR

Payment Details

BSB : 062908

ACC : 10439152

American Car Club of Australia