

TOWNSVILLE CITY AUTOSPORTS CLUB INC.
 Po Box 7697 Garbutt QLD 4814
 Email to: townsvillecityautosportsclub@outlook.com
 Website: <http://www.tcac.com.au>
 ABN 16 507 002 943



MEMBERSHIP APPLICATION/ RENEWAL FORM FEES

Payments to TCAC Account: BSB 633 000 Account 160540936

FEES for year starting 1st April 2026 ending 31st March 2027.

SOCIAL MEMBERSHIP : \$15.00 Single \$25.00 Family
COMPETITIVE: \$75.00 Single \$90.00 Family

| Admin Check | |
|-------------|----------------------|
| 1 | Allocate Mem. No. |
| 2 | Add to database |
| 3 | Welcome letter |
| 4 | Add to mailing lists |
| 5 | Send mem card |
| 6 | Approved at Meeting |

(Note: New members who sign up between 1 Jan and 31 March are given membership for the following year.

I, the undersigned hereby apply to become a member of the above mentioned association. In the event of my admission as a member, I agree to be bound by the rules of the association at all times.

| | | | |
|--|-------|---------------|--------|
| Name | | Phone: | |
| Address | | Postcode | QLD |
| Postal Address | | Postcode | QLD |
| Email Address | | Date of Birth | |
| Applicant Signature: | | Date | |
| MA Licence No.(if held): | | First Aider? | Yes/No |
| Grade/Level | | | |
| Family members - (Spouse and/or children aged between 12 and 18 years of age) | | | |
| Name | Phone | Email | DOB |
| | | | |
| | | | |

NOMINATOR AND SECONDER

| | |
|---|-------------------|
| Nominator: I, the undersigned, a member of the association, nominate the applicant the applicant, who is personally known to me for membership of the association. | |
| Name: | Signature: |
| I, the undersigned, a member of the association, second the nomination of the applicant, who is personally known to me for membership of the association. | |
| Name: | Signature: |

NOTE: if you do not know anyone in the club you can contact the Secretary for a short phone interview. Once the form is completed and you have paid the fee you will then be nominated at the next club meeting and accepted into the club.