



# EH HOLDEN

# CAR CLUB

Western Australia

PO Box 644 CLOVERDALE WA 6985

### MEMBERSHIP APPLICATION/RENEWAL

(PLEASE FILL OUT FORM IN BLOCK LETTERS)

Surname: \_\_\_\_\_ First Name/s: \_\_\_\_\_

Address (Home): \_\_\_\_\_

\_\_\_\_\_

Address (Post): \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

Membership No: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male / Female

How did you find out about the Club? (New members): \_\_\_\_\_

Vehicle	Licence No.	Model Std, Special, Premier	Body Sedan, Wagon, Ute..	Engine	Transmission
Modifications					
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Modifications					

Please enclose a CURRENT photo of the vehicle/s and/or email to: [secretary@ehcarclubwa.org.au](mailto:secretary@ehcarclubwa.org.au)

(Please circle appropriate type)

Membership Type:    Full \$70.00                      Family \$100.00                      Associate \$35.00

*(membership fees current as of 1/3/2017)*

I hereby apply for membership/renewal of membership for the EH Holden Car Club of WA Inc and agree to abide by the Constitution & Statement of Purposes.

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Date