



SUNSHINE COAST ANTIQUE CAR CLUB

(Incorporating Antique Car Club of Nambour)

A.B.N. 64 010 012 781

P.O. Box 362
NAMBOUR QLD 4560

General Enquiries: 0404 291 146
Email: scaccsecretary@gmail.com
Web Site: www.scacc.org.au

APPLICATION FOR MEMBERSHIP

Membership Number

I and my spouse / partner

of Postcode.....

PH: MOBILE: EMAIL:

In Case of Emergency (ICE) contact: Name Phone:

wish to apply for membership of the The Sunshine Coast Antique Car Club. (Note: Partners of members can automatically become associate members for free without voting rights.) **I/We agree to be bound by the Articles of Association and any Rules made by the Club. I/We will participate in Club events to the extent that I/we are able, recognizing that a minimum of three meetings (one should be the AGM) and three rallies each year is the expectation of my fellow members.**

Single Membership \$45. Dual Membership \$55.00

- I understand that the Club is a not-for-profit company, limited by guarantee.
- All members are expected to work a 3 hour shift at our annual Swap Meet on the last Saturday of July. Shift times run from Friday 10am through the night to Saturday afternoon.

Yes	Day & Time

Please indicate your willingness to help out at the Swap by indicating day

The Club is required to keep a membership register including personal contact details which is maintained by the Club Registrar. From time to time the Club publishes this Register for distribution to Club members to allow contact between members, **only** using name, phone and email details. Your privacy is important

Signed / Date...../...../.....

*****PROPOSED BY** (Print name)
who is a financial member of the Sunshine Coast Antique Car Club

How would you like name/s printed on Club badge/s -

Our club newsletter, **Auto Antics** will be emailed monthly (posted if no email address)

PAYMENT METHOD (Tick one box)

- Cheque payable to Sunshine Coast Antique Car Club.
- Cash
- Direct Deposit to SCACC Bank Account at

Bendigo Bank BSB: 633 000 Account Number: 169305224

Please use your Surname and Initials as the payment reference

Payment of dues appreciated at the time of application.

PTO

Please list your vehicle/s which are of interest to the Club:-

IF INSUFFICIENT SPACE PLEASE ATTACH EXTRA SHEET

YEAR	MAKE	MODEL	BODY STYLE	CONDITION (See Legend)	REGISTRATION (See Legend)

<p><u>CONDITION LEGEND</u></p> <p>Original = O Restored = R Under Restoration = UR Parts Car = PC</p>	<p><u>REGISTRATION LEGEND</u></p> <p>Concessional Plates = CP Not Registered = N Full Registration = F</p>
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APPLICATION PROCEDURE

Applicant/s must complete 3 club events verified by a committee member before being accepted by the committee.

Club events attended:

Confirmed by:

1.Date..... Name.....Sign.....
2.Date..... Name..... Sign.....
3.Date.....Name..... Sign.....

Committee use only

Application presented to Committee on

Application presented by Accepted

Letter / email sent by Secretary on

Presented to General Meeting.....

Membership type Single Dual

Membership dues paid \$..... Date.....

Membership number