

JAGUAR DRIVERS CLUB OF SA Inc

Website www.jdcsa.com.au PO BOX 6020 HALIFAX ST ADELAIDE SA 5000

Membership Secretary: Daphne Charman - 0404 999 200 or 82484111- email: membership@jdcsa.com.au

JDCSA MEMBERSHIP APPLICATION FORM

I/we hereby make application to become a member(s) of the Jaguar Drivers Club of South Australia Incorporated, and if accepted, undertake to abide by the rules of the Club.

	BER DETAILS		
Member	Adult Family Member (if applicable) - see # below		
Full Name:	Full Name:		
Preferred name (For your name badge)	Preferred name (For your name badge)		
Work telephone no.	Work telephone no.		
Mobile telephone no.	Mobile telephone no.		
Residential Address	Postcode		
Postal Address	Postcode		
Home telephone no. Is this a (silent numbers are listed as such on membership lists & are of	a silent number? Yes / No only available to committee members/register secretaries)		
email addre			
MEMBERSHIP CATEGORY -	PLEASE TICK CATEGORY REQUIRED		
	annual subscription + once only joining fee of \$35.00 = \$100.00		
	annual care only joining to a confidence of		
Membership.	amily Member and they are entitled to all rights and privileges of Full		
(Children under 18 can be included in Family Members Child's Name Date of birth (1)	hip at no extra cost - they are not entitled to vote or hold office) Child's Name Date of Birth		
(2)	(4)		
Enclosed is payment for membership \$			
I agree to the information supplied on this accessible only to the administrators of the cl	s form being used on membership and mailing lists		
PAYMENT O	PTIONS AVAILABLE		
□Cheque □Money Order □Cash □MasterCard □Visa	Expiry Date: MonthYear		
Card Number:			
Signature	Amount authorised \$		
Name on Credit Card -	<u></u>		

ABN 54747435916 - GST does not apply. The club is not required to register for GST.

PLEASE ADDRESS CORRESPONDENCE TO

THE MEMBERSHIP SECRETARY PO BOX 6020 HALIFAX ST ADELAIDE SA 5000

PTO

JAGUAR, DAIMLER AND LANCHESTER VEHICLES CURRENTLY OWNED

Please attach list if insufficient room

	Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4
Make				
Model	- 10			(V)
Year				
Body style				
Colour(s)				
Engine Capacity				
Engine No.				
Chassis No. / VIN	4			
Registration No.				20
We wish to provide rele You could help us by p What are your reason(s Please tick or complete	roviding the followins) for joining the Club	g information.		36900 T 5077
Social				
Technical Assistan	ce	*		
Historic Registratio	n			
Cheaper Insurance)			
Sporting Events		12		
Magazine - Classic	Marque			
Other - please spec	cify			
How did you hear abou Please tick or complete		ppropriate:		
Club member know	vn to you			
The Advertiser				
SA Jag Day		22		
Other event (please	e specify)			
Publication (please	specify)			
Telephone Book				
Trade House (e.g.	Solitaire)			