

**The HARLEY CLUB of VICTORIA Inc**

A0034828J

APPLICATION FOR MEMBERSHIP

Registered address: 27 Forest St, Whittlesea, 3757. Ph/Fax 9716 2590

Before signing this form, Date.....  
Please read all questions and print all answers

To the Secretary,

I Desire to become a Member of the Harley Club of Victoria, and I hereby agree, if elected, to observe the Rules and By-Laws which may from time to time be in force. I also agree that giving False or Misleading information in this Application may Stop my Application or if Elected as a Member based on this information, may render me Liable to Fine,Suspension or Expulsion from the Club at the Committees discretion.

**PLEASE PRINT CLEARLY**

NAME.....

ADDRESS.....

.....PC.....

PHONE.....

EMAIL ADDRESS.....

Address for Correspondence.

.....

AGE and DATE of BIRTH.....

OCCUPATION.....

PARTICULARS of CYCLE and MAKE.....

.....

ARE YOU A MEMBER OF ANY MA AFFILIATED MOTORCYCLE CLUB.

..... IF YES, PLEASE STATE CLUBS YOU BELONG TO.

.....

.....

We the Proposer and Seconder, Believe that the APPLICANT on this form is a Suitable person to be Elected as a MEMBER of the HARLEY CLUB of VICTORIA and is KNOWN to us.

THE Proposer and Seconder must both be FINANCIAL MEMBERS of the HARLEY CLUB of VICTORIA

PROPOSER.....SIGNED .....

SECONDER.....SIGNED .....

A Parent must also sign for a Junior to give CONSENT

SIGNED Applicant.....

Parent.....( If applicant is under 18 years old)

OFFICE USE ONLY. Receipt No.....

SINGLE \$40.00

JUNIOR \$20.00

FAMILY \$60.00

Country membership ( more than 50 klms from GPO ) all fees half the above prices

Please tick all appropriate boxes above

VIEWED BY GENERAL MEETING YES / NO ( Office use only)

PASSED ..... YES / NO ( Office use only)

DATE of ELECTION.....

NOMINATION FEE. \$5.00 .....(Paid by all **new** memberships only)

AMOUNT PAID.....

Membership runs from July 1 to June 30 the following year. New memberships are calculated on a pro- rata basis from the joining month to the end of the financial year.