

**PRE 65 SALOON REGISTER INC - Application for Membership**

- Full Membership (Competitor) = \$200.00**
- Full Family Membership (1 driver, spouse & siblings) = \$220.00**
- Social Membership = \$50.00**
- Social Family Membership (social member, spouse & siblings) \$70.00**

FULL NAME: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

for MANZ stats only

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

CONTACT PHONE NUMBERS:

HOME: \_\_\_\_\_ WORK: \_\_\_\_\_

FAX: \_\_\_\_\_ CELLPHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**MEMBERSHIP STATUS REQUEST (circle one):**

**FULL / FULL FAMILY (PTO to complete attached sheet – required for MANZ Stats)**  
**SOCIAL or SOCIAL FAMILY (PTO to complete attached sheet – required for MANZ Stats))**

**IF REQUIRING FULL MEMBERSHIP, PLEASE COMPLETE THE FOLLOWING:**

CAR NUMBER: \_\_\_\_\_ or REQUESTED CAR NUMBER: \_\_\_\_\_

COMPETITION LICENCE NUMBER: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_

ARE YOU A MEMBER OF A MOTORSPORT CLUB? YES / NO

IF YES, CLUB NAME: \_\_\_\_\_

CAR DETAILS: \_\_\_\_\_

HISTORY OF DRIVER: \_\_\_\_\_

\_\_\_\_\_

**I, HEREBY AGREE TO ABIDE BY THE RULES & REGULATIONS OF THE PRE 65 SALOON REGISTER INC. AS LAID DOWN IN THE CONSTITUTION.**

SIGNATURE OF NEW MEMBER: \_\_\_\_\_

SIGNATURE OF PROPOSING MEMBER: \_\_\_\_\_

**Please Note: Ownership of a car is not necessary for membership of the Register.**

Please return completed application & money to:

Pre 65 Saloon Register (Inc)  
P O Box 5729, Dunedin 9058

**FAMILY MEMBERSHIP DETAILS (note, please complete only if different from applicant's details e.g. address, phone no.s etc)**

**FULL NAME:** \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_  
for MANZ stats only

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**CONTACT PHONE NUMBERS:**

**HOME:** \_\_\_\_\_ **WORK:** \_\_\_\_\_

**FAX:** \_\_\_\_\_ **CELLPHONE:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

---

---

**FULL NAME:** \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_  
for MANZ stats only

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**CONTACT PHONE NUMBERS:**

**HOME:** \_\_\_\_\_ **WORK:** \_\_\_\_\_

**FAX:** \_\_\_\_\_ **CELLPHONE:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

---

---

**FULL NAME:** \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_  
for MANZ stats only

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**CONTACT PHONE NUMBERS:**

**HOME:** \_\_\_\_\_ **WORK:** \_\_\_\_\_

**FAX:** \_\_\_\_\_ **CELLPHONE:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_