

THE RILEY MOTOR CLUB OF VICTORIA INC.

PO Box 43 Camperdown. Vic. 3260

Email: colindennis54@gmail.com

To the Committee,

I hereby apply for membership of the RILEY MOTOR CLUB OF VICTORIA INC. and agree to abide by the Special Rules of the Club.

APPLICANT'S DETAILS:		
Last Name	Other Names	
How would you like your names to appear on your Club name b	adge?	
Home Address		Postcode
Postal Address		Postcode
Phone Numbers Home : Mobile		
Email (clearly written capital letters only please)		
Associate Member Details		
Last NameOt How would you like your name to appear on your Club name ba		
VEHICLE DETAILS:		
Vehicle Type and ModelYear 19	Chassis Number	
Vehicle's colour:		
Registration Number Previous Owner,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Previous Registration Number/s if known		
If you own more than Riley, please attach a separate list, with the	eir details	
APPLICANT'S SIGNATURE		DATE/
ASSOCIATE MEMBER'S SIGNATURE (If applicable)		DATE//
FEES AND PAYMENTS: Joining fee \$ 10.00 Once only Spar /12 \$ *Associate Membership Subscription \$10.00 (option		· · · · · · · · · · · · · · · · · · ·

Payment can be made by Electronic Funds Transfer to The Riley Motor Club of Vic Inc. BSB: 033 052 Account Number: 781866 (Please identify the payment with your name)

If posting your application & cheque, please send to The Membership Secretary,
The Riley Motor Club,
PO Box 43.
Camperdown, Vic. 3260