



APPLICATION FOR MEMBERSHIP

Member Details

Given Names	Surname
Address	
Postcode	
Phone	
Email	

Car Details

Make and Model	Log Book No.	Preferred Race No.
----------------	--------------	--------------------

Emergency Contact Details (Next of kin)

Name	Contact No.	Address
------	-------------	---------

Details of Fees – Annual subscription each calendar year

Full Membership – required if applying for a CAMS competition licence	\$70.00
Social Membership	\$25.00

I, the undersigned, undertake to abide at all times by the rules and regulations of the Association, as set out in the Constitution of the Formula Vee Association of South Australia Inc.

Signature	Date
-----------	------

Please print out this form, complete it, and send it to Brian, Treasurer, FVASA.

Payment can either be included as a cheque made payable to “Formula Vee Association of SA Inc” or you can pay directly into our Bank account.

Brian Pedersen, Treasurer FVASA
 14 Geoffrey Ave,
 Valley View SA 5093
 0422 752 190
 thepedersen@bigpond.com

BankSA
 BSB: 105-192
 Account: 033157740
 Please put your name as the Description.