



MEMBERSHIP APPLICATION FORM

This form is for use by new members wanting to join the IMCT

Membership type (mark applicable box)

Full¹ or Associate²
 Individual or Family³

Member details⁴

	Individual	Additional family member (if applicable)
Name		
Email(s)		
Residential Address		
Postal Address ⁵		
Home Telephone		
Mobile		
Emergency Contact ⁶		
Motorcycle(s) Year, Make, Model		

DECLARATION:

I hereby agree to abide by the Constitution and By-Laws of the Italian Motorcycle Club of Tasmania Incorporated.

	Individual	Family member
Signature/Date		

¹ Full membership is restricted to persons who own an Italian motorcycle.

² Associate membership is given to persons who don't own an Italian motorcycle.

³ Family membership consists of an Individual (full or associate member) plus one nominated member of his/her immediate family, who shall have the status of associate member.

⁴ Member information is treated as confidential and will not be given to third parties.

⁵ If different to residential address

⁶ Name, relationship, contact number

Payment details

Annual subscription

Individual membership \$30 Family membership \$40

Step 1:

Direct deposit⁷

Name: Italian Motorcycle Cub

BSB: 807 009

Account number: 12119943

Description/Reference⁸: Your surname

Step 2:

Email documentation⁹

After filling out the application form and paying the annual subscription, please scan and email the form to secretary@imctas.com.

⁷ If you cannot direct deposit, please email treasurer@imctas.com for an alternative payment method.

⁸ This is important as without this we don't know who has made the payment

⁹ If you are unable to email the documentation, please call the Secretary on 0417 528 044 for an alternative method.