**Application for Membership**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (name) (address)

Being the registered owner/licensed driver of \_\_\_\_\_\_\_ and holding current Group One

 (vehicle)

Licence No. \_\_\_\_\_\_\_, hereby apply for ordinary/associate/affiliate\* membership of The Australian Top Doorslammer Association (Inc.) and agree to be bound by the rules of the association.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed

My current contact details are as follows:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile

Payment for the $300.00 being the fee payable is to be paid via Eft

Account Name: ATDA

BSB: 036 084

Account Number: 455 938

Reference: Name

Please complete the below driver profile questionnaire for website use.

Name:

Team name:

Age:

State:

Years in sport:

Achievements:

Car make:

Engine:

Gearbox:

Diff:

Hp:

PB:

Fun fact:

Sponsors:

Please return this form to theatdasecretary@gmail.com along with a high-resolution photo of your car (preferably on track) & team logo along with your remittance of paid membership.