

2017

Membership Application Form

St Ives Remote Control Car Club

www.stivesrc.com

Name : _____ DOB : _____

(If Under 18)

Address : _____

Phone : _____

Email : _____

AARCMCC Number: _____

Additional Family Member : _____

This membership entitles you to membership of all AARCMCC sections.

Signed : _____ Date : _____

I have read and hereby agree to the terms and conditions of the St Ives Remote Control Car Club.

Admin Only	Paypal account for deposit: mtoms@snappycards.com.au
Date : / /	
Fees Due : \$_____ Paid : Transfer /Paypal <input type="checkbox"/> Cash <input type="checkbox"/>	
Membership No : _____	
Nomination Accepted By : _____	