



CROSS COUNTRY DRIVERS ASSOCIATION MEMBERSHIP APPLICATION FORM

Membership Period - 1st July, 2008 to 31st December, 2008

Membership Period - 1st July, 2008 to 31st December, 2009

CCDA Membership Number: _____

Inc. No: A0044901E

Competitor:

Surname: _____ First Name: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Country: _____

Date of Birth: _____ Drivers Licence Number: _____

Occupation: _____

4WD Club: _____

Email Address: _____

Phone (BH): _____ Phone (AH): _____

Phone (Mobile): _____ Fax: _____

Family Membership - Non Competitor:

Partner / Spouse:

Full Name: _____ Date of Birth: _____

Dependants (16 - 18 Years):

Full Name: _____ Date of Birth: _____

Full Name: _____ Date of Birth: _____

NEWSLETTER: (Please circle one...)

Australia Post Email Download

CCDA Membership Fees fall due on the 1st of January each year

Membership Fee Structure: (The dates in the brackets indicate the cover period)

Single: 1 x Competitor @ \$44.00 inc GST (1/7/08 - 31/12/08) or \$66.00 inc GST (1/7/08 - 31/12/09)

Family: 1 x Competitor @ \$44.00 inc GST (1/7/08 - 31/12/08) or \$66.00 inc GST (1/7/08 - 31/12/09)
plus \$22.00 inc GST (1/7/08 - 31/12/08) or \$33.00 inc GST (1/7/08 - 31/12/09) for each
Partner / Spouse & Dependant

Please post / fax your membership application / renewal form to:

Cross Country Drivers Association
Attention: Membership Registrar
P.O. Box 582
BAYSWATER VIC 3153
Fax: 03 9717 2322

Please make **cheques** payable to "Cross Country Drivers Association"

Credit Card Payment: (Please circle...) VISA MASTERCARD

Payment Amount: \$ _____ Card Holders Name: _____

Card Number:

Expiry Date: CCV:

Signed: _____

Office Use Only

Date Received	Financial To	Entered By	Date Entered	Membership Number