Early Ford Car Club of South Africa MEMBERSHIP APPLICATION

I, the undersigned, do hereby apply for (PLEASE PRINT)	or memb	ership	of the E	arly For	d Car Clu	ıb of SA, and	d submit the following part
Surname			Nam	ie:			
Address:				_Postal			
						Code:	n
Name req'd on Name Tag:		_ Spc	ouse/Par	tner Na	ne (for na	ame tag):	
Phone No's (home):			(wo	ork)			
(Cell):		(e	email)				
Date of Birth:			_ 00	cupatio	n		
Spouse/Partner date of birth (day and	l month)						
Are you a member of any other motor	club, vir	ntage o	or otherw	vise?	Yes		No 🔲
If Yes, state name of club							
Should my application be successful, indemnity form	I agree t	o be b	ound by	the Clu	b's Rules	and Constit	tution, and have signed th
Date S	ignature	••••				.	MEMBERSHIP FEES Calculated as follows
The SAVVA. Insurance is only accessible	after 12 r	nonths	of memb	ership.			aculated as follows
						. L	OCAL MEMBERS
Proposed by	and ind	Entry fee/Name tag/ SAWA dues and indemnity					
Signed			*******				Subs R360.00 R530.00
Seconded by			•		•	COUNT	TRY MEMBERS
Signed			• • • • • • • • •				ee/Name tag/ SAWA dues
Accepted on	Annual	and indemnityR170.00 Annual SubsR270.00					
Signed				******	····s	TOTAL	R440.00
Hand completed forms to The Secre	etary of	The E	arly For	d Car C	lub, or e-	-mail to	
secretary@earlyfordcarclub.co.za							
OFFICE USE:	yes	no	fees	yes	cash	cheque	Number allocated & Indemnity form
Completed Application form							
Completed Indemnity form							

Vehicles owned:

Make	Model	Year	Condition	Registration No.	Dating Cert.
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