CHRISTIAN MOTORCYCLE ASSOCIATION (TAS) ASSOCIATE Membership Application Form

Somerset 7322

Membership fees per financial year July—	–June (Payable from July 1st each year)	
☐ Single Membership - \$30.00 ☐ Family N	Membership - \$50.00 □ Pensioner Single- \$20	0.00
□ Pensioner Family \$30.00		
Personal Contact Information		
Full Name:		Address:
Suburb:	P/Code:	Home Phone: ()
Mobile: _		
E-mail:	Date of Birth:/	
Other Nominated Family Members (For F	Family Membership only)	
CMA Member Sponsor:	Ph: ()	
1) Referee:	Ph: () Email:	Address:
	Ph: ()	Address:
• I /we apply for Associate membership o Police Check Record if requested.	of the Christian Motorcyclists Association (Tas) and will provide an initial
• I /we give my/our consent for my/our p Associates upon request.	personal contact information to be supplied to	o other CMA members and
• I /we have enclosed a cheque / money of	order for my/our membership.	
• Associate membership is renewable ea	ach year at the discretion of the Executive Con	nmittee.
•I /we also acknowledge that according to office or vote in elections for Officers of t	to the constitution as an Associate member(s) the CMA.	I/we will be ineligible to hold
• I/we agree to participate in CMA activit Mission Statement.	ties in accordance with the objectives encomp	passed in the Associations
	ct any application for membership without fur Ily accepted. Membership application monies	•
Signed:	Date:/	
Please post Application Form with the ap	propriate fee to: CMA (Tas) 115 Little Village I	Lane