## Triumph Car Club ACT Inc. PO Box 70 CURTIN ACT 2605



May 23

## Membership Renewal Form Payment of Forty Dollars (\$40) is to be made by 30 June

Full Name:					(Member)	
Partner:					(Family Member)	
Address:						
Mobile	W	ork		Homc		
E-mail:						
Vehicle Details: Make:	Model:	Year:	Colour:	Registration No:	State:	
2:						
3:						
Are you a member of a	ny other Car Clu	bs?	Yes	No 🗌		
If Yes, which one(s)?	1					
I have received a copy rules etc., therein.	of the Constituti	on and By L	aws of the Triu	nph Club of the ACT Inc.	, and agree to abide by the	
(Member's Signature)				(Date)		
BSB: 062 905; Acct Please do not use EFT PLEASE	No: 10011365; facilities over the USE YOUR I your cheque to t	Acct Note counter as y NAME AS the Treasurer	ame: Triumph ( your payment d THE REFER as indicated be	etails will not be recognis	ed. NG BY EFT. nt to the next Club event as	
My payment is enclose	ed.		1-1			
			Cheque n	nade payable to Triumph		
				I have EFT'd my pays		
				Club membership nun		