



Cairns & District Kart Racing Club Inc
 ABN: 62 339 865 773

Membership Subscription/ Tax Invoice

MEMBERSHIP APPLICATION / RENEWAL 2006-2007

OBJECTIVES:

The objectives of the association are –

- To promote a healthy spirit of sportsmanship
- To promote social activities among members
- To affiliate with Associations having similar aims and objectives
- To foster and develop safe karting procedures and to familiarize members with all safety aspects
- To encourage and promote all forms of kart activities
- To assist worthy charities
- To do all lawful acts and things that are incidental to the carrying out of the above aims and objectives

Name/Nominee:	D.O.B. / /	Phone:
Email:	Mobile:	Fax:
Street Address: Suburb/Postcode	Postal: Suburb/Postcode	
Emergency Contact/s:	Phone:	
Occupation:		
Member of another Club:	Class/es Competing In:	
1 st Aid Cert. No.	Expiry / /	Volunteer Blue Card No. Expiry / /

I agree to be bound by the rules of the association:
 Applicants under 18 years of age must have a Parent/Guardian sign the nomination Form

NameSignature: Date/...../.....

I,being a financial member of the Cairns & District Kart Racing Club Inc., nominate the applicant for membership.

Signature..... Date/...../.....

CLUB MEMBERSHIP FEES – see over for membership details

NEW Members Joining Fee Payable on joining or re-joining after membership lapse		\$20.00
ORDINARY Member – Senior Licence Holder (<i>Under 18 yrs Nominated Parent holds voting Right</i>)		\$65.00
ORDINARY Member – Junior Licence Holder (<i>Nominated Parent holds Voting Right</i>)		\$55.00
<i>Licence Holders under 18 yrs</i> Nominated Parent		
ASSOCIATE Member		\$35.00
CASUAL Member		\$20.00
LIFE Member		\$0.00

AKA LICENCE FEES – see over for further details

NEW Licence Fees – Midget/Rookie/Junior/Senior		\$210.00
RENEWAL Licence Fees - Midget/Rookie/Junior/Senior		\$190.00
PRACTICE Licence Fees		\$180.00
UPGRADE From Practice to New Licence Fees		\$120.00
LATE Expiry Fee – for licences being renewed <i>more than 30 days past their Expiry date</i>		\$20.00
REPLACEMENT Licence (Lost / Damaged)		\$11.00

TOTAL AMOUNT DUE TO BE PAID ON ___/___/___ **or BEFORE** ___/___/___

TOTAL AMOUNT DUE IF RECEIVED AFTER ___/___/___

Cheques should be made payable to:- Cairns & District Kart Racing Club Inc. P.O. Box 8152, Cairns Qld 4870

THANK YOU FOR YOUR MEMBERSHIP APPLICATION

Membership Details:-

Associate Member

Life Members

Casual Members

Each member present is entitled 1 vote only. A member is not entitled to vote at general meeting if the member's annual subscription is in arrears at the date of the meeting.

Parent of a Junior (under the age of 16yrs) as per nominated on this form has the right to vote on their behalf at general meetings.

Parent of a Senior (under the age of 18years) has the right to vote on their behalf at general meetings.

Members will receive regular copies of the Club Newsletter via post or email.

AKA QLD

Current Racing Classes

Class	Age	Weight*
Midgets	7-10	>90kgs
Rookies	10-12	>105kg
Junior Nat Light	12-16	>120kg
Junior Nat Heavy	12-16	>140kg
Senior Nat Light	16+	>140kg
Senior Nat Heavy	16+	>160kg

Class	Age	Weight*
Clubman Light	16+	>140kg
Clubman Heavy	16+	>160kg
Clubman Super Heavy	16+	>180kg
TAG 125 Light	16+	>160kg
TAG 125 Heavy	16+	>180kg

* TAG (Touch & Go) Rotax, Leopard, Biland, PRD Fireball

- Weight = Combined weight of kart and driver

CHECKLIST

Please ensure you have included the following before returning this form:-

- 1. Membership Form
- 2. Payment
- 3. Licence Form
- 4. AKA Indemnity Form
- 5. 1 x Passport Photo
- 6. **Copy** of Birth Certificate for **NEW** Licence Applications under 18 years.
- 7. Medical Examination Form (*applicable for persons 60 years and over*)

PAYMENT METHOD: Credit Card

<input type="checkbox"/> Visa Card	Credit Card No.	_____	_____	_____	_____
<input type="checkbox"/> MasterCard	Card Holders Name:	_____			
<input type="checkbox"/> Bankcard	Cardholders Signature:	_____	Expiry Date:___/___	_____	
	Amount	_____			
	C/Card Admin Fee	_____	\$5.00	_____	
	Total Amount Authorised:	_____			

Office Use Only					
Received	___/___/___	Date Processed	___/___/___		