







MEMBERSHIP APPLICATION FORM

ALL SECTIONS MUST BE COMPLETED, PLEASE ALLOW 4 WEEKS FOR PROCESSING

MEMBERSHIP \$50 (PER ANNUM)

Cheques/postal orders payable to: Ford RS Owners Club (Aust)
Direct Debit: Acc Name: Ford RS Owners Club (Aust)
BSB: 112 879
Acc No. 491 973 498

Please forward payment to: Membership Secretarty

PO Box 990 STANHOPE GARDENS NSW 2768.

Name:					
Address:					
		Postcode:			
Contact Details:	Home:	Work:			
	Mobile:	Email:			
Occupation:					
DOB:					
Previous Member	ship Number:				
Where did you he	ear of the Ford RS Owners Clu	ıb (Aust):			
Do you want to b	e notified by email of forthcon	ning club events?	☐ Yes ☐ No		
FULL MEMBE	ERSHIP				
RS Model:		Colour:	Colour:		
Chassis Number:		Engine Number:	Engine Number:		
Registration Number:		State:			
A copy of registration pa	pers and photograph are required for full r	nembership, If registration papers	are not available other proof of	f ownership is required.	
ASSOCIATE (MEMBERSHIP				
Make/Model of v	ehicle				
Registration Number:		State:			
Which RS vehicle	e are you interested in?				
Signed:			Date:		

www.rsownersclubaust.com.au













