

WANNEROO FLAG MARSHAL ASSOCIATION Inc.

www.wfma.com.au

Year 2017 Membership Application Form

- Name: (last) _____ (first) _____
- Address: _____
- Suburb: _____ Post Code: _____
- Phone: Home _____ Mobile: _____ Work: _____
- Email Address: _____ Date of Birth: ___/___/___

Do you want the Newsletter emailed to you? YES NO

- Employed/industry you work in
or special skills you may have to assist the Club (optional) _____

Next of Kin/Contact Name _____ and Number _____

CAMS Licence Number: _____ Class: _____ Expiry Date ___/___/___

Any medical condition, allergies etc

(in case of emergency/accidents at Race Meetings): _____

MEMBERSHIP FEES – YEAR 2017

Please indicate the membership you are applying for below:

Full Member: \$30.00

Concession: \$15.00 ID details: _____

Please confirm/produce ID (Full time Students, Pensioners, Unemployed etc)

Please return this form to the Secretary/Treasurer at the next meeting or post to:

The Secretary

Wanneroo Flag Marshal Association Inc.

27 Morton Loop

Canning Vale WA 6155

Please note: Acceptance of this form by the Wanneroo Flag Marshal Association Inc. does not automatically signify that full membership to the Association has been granted to “New Applicants”. A probationary period, at the discretion of the Committee and a willingness to attend Club Meetings, must be achieved before membership rights will be granted.

Declaration: *I, the undersigned, understand the above, and will abide by the Constitution of the Wanneroo Flag Marshal Association Inc.*

Waiver: I do/ I do NOT (please circle one) give permission for any images/photographs of myself taken while performing my duties as a Flag Marshal or in any other capacity, at any venue, to be used for promotion purposes under any circumstances.

Signature: _____ Date: ___/___/___

Payment method: Cash / Bankpay

If paying by Bankpay: WFMA Inc @ Bankwest. BSB: 306-084 Account No: 4183810

Please use your Last Name as the reference

WFMA use only: Receipt Number: _____ Date: ___/___/___