



PO BOX 550 Gympie Qld 4570

ENQUIRIES: Frank Kraan 0439339101, Andrew Brook 0419 642 963

## MEMBERSHIP FORM 2010

I/we would like to join the Gympie Motorcycle Club Inc.

(PLEASE PRINT YOUR DETAILS CLEARLY)

FAMILY NAME

FIRST NAME/S (including all family members who wish to be members)

DOB IF UNDER 16

POSTAL ADDRESS

CONTACT PHONE NUMBER

EMAIL

\*\*\*\*MOBILE NUMBER FOR  
TEXT MESSAGE SERVICE

  
  

Go to our website for more up to date info on any rides or events that we are running:

[www.gympiemotorcycleclub.com](http://www.gympiemotorcycleclub.com)

ENCLOSED IS MY YEARLY MEMBERSHIP CONTRIBUTION OF:

(\$20 INDIVIDUAL \$35 FAMILY)

SIGNATURE & DATE

OFFICE USE ONLY

RECEIPT NO: \_\_\_\_\_ M/SHIP CARD SENT: \_\_\_\_\_

**For Direct Deposits:**

**Bank of Queensland**

**BSB: 124001 A/C: 10181654**

**In reference section use your surname.**

**Send this membership form in with your direct deposit receipt number.**