



PO BOX 1310 CRESTA 2118

MEMBERSHIP APPLICATION FORM / RENEWAL

I hereby apply for / renewal membership of **Cresta Wheelers** and in so doing I agree to abide by the club's constitution and Code of Conduct. I understand the membership of **Cresta Wheelers** is granted on the distinct condition and understanding that neither **Cresta Wheelers** as a club, nor any of its office bearers, accept/s responsibility for any accident, injury, illness or death suffered by any person, including theft, loss or damage to any property occurring during any club outing or event howsoever caused, whether allegedly due to any negligence of the club, or any of its office bearers, or arising in any manner or from any other cause whatsoever.

NEW MEMBERS AND RENEWALS MUST COMPLETE THE FORM IN FULL.

FAILURE TO COMPLETE REQUIRED SECTIONS MAY INVALIDATE THIS APPLICATION. ALL MEMBERSHIP APPLICATIONS / RENEWALS ARE SUBJECT TO APPROVAL BY THE EXECUTIVE COMMITTEE.

Electronic submission of this application confirms acceptance of the above.

Surname		Identity/Passport Number	
First Name/s		Date of Birth	
Call Name		Residential Addr. Line 1	
Postal Address Line 1		Residential Addr. Line 2	
Postal Address Line 2		Residential Addr. Suburb	
Postal Address City		Residential Addr. City	
Postal Address Code		Residential Addr. Code	
Telephone Home		House Doctor Name	
Telephone Office		House Doctor Tel No.	
Telephone Mobile		Allergies / Disorders / etc.	
E-mail address		Blood Group	
Gender (Male/Female)		Medical Aid Name	
Next of Kin Name (First Emergency Contact)		Medical Aid Membership No.	
Next of Relationship		Medical Aid Main Member	
Next of Kin Contact No. (Second Emergency Contact)		Occupation / Profession	
CGC Grade		Membership Type	<input type="checkbox"/> New <input type="checkbox"/> Renewal
ChampionChip No.		Have you paid for CSA membership online?	<input type="checkbox"/> Yes (Argus) <input type="checkbox"/> Yes (+ CGC) <input type="checkbox"/> No
Racetec Chip No.		Amount Due	

Signed: _____
(Legal Guardian if under 18 years of age)

Date: _____
(dd/mm/yyyy)

FOR OFFICIAL USE ONLY	CSA Membership Appl. Submitted.	
Paid	CGC Submitted/Confirmed	
Welcome letter/ Newsletter	Membership Card Issued	Database updated