## **JDCSA Membership Application Form**

## **JAGUAR DRIVERS CLUB OF SA**

PO BOX 6020, HALIFAX ST.

Individual Me

# Family membersh

ADELAIDE SA 5000 Web: www.jdcsa.com.au

Application for membership of the club can be made by completing and posting this form or

alternatively by making application on-line at: jdcsa.tidyhq.com/public/membership\_levels/c3f358d70706

MEMBERSHIP CATEGORY REQUIRED				
mbership	Family Membership	(\$70 Annual subscription - plus once only joining fee \$35 - Total \$105)		
ip may include the main Member plus Spouse/partner and/or adult (18yrs +) children.				

MEMBER DETAILS TO BE COMPLETED				
Individual Member	Family Member (1) If Applicable #			
Full Name:	Full Name:			
Preferred Name: (To be used on your name badge)	Preferred Name: (To be used on your name badge)			
Mobile Number:	Mobile Number:			
Email Address:	Email Address:			
Residential Address:	Post Code:			
Postal Address: (If different from Residential)	Post Code:			
Emergency Contact Person: Name:	Mobile Number:			

Family Member (2) If Applicable #	Family Member (3) If Applicable #		
Full Name:	Full Name:		
Preferred Name: (To be used on your name badge)	Preferred Name: (To be used on your name badge)		
Mobile Number:	Mobile Number:		
Email Address:	Email Address:		
Residential Address:	Residential Address:		
Postal Address: (If different from Residential)	Postal Address: (If different from Residential)		
Post Code:	Post Code:		

I/We hereby make application to become members of the Jaguar Drivers club of South Australia and agree to the personal information provided in the form being stored on membership mailing and mailing lists accessible only to the administrators of the club.

Signature/s					Date:		
PAYMENT OPTIONS AVAILABLE							
Master Card	Direct	Debt Jaguar Drive	ers Club SA	<b>BSB:</b> 035-053	<b>ACC:</b> 419	€219	
Card Number			Reference: Please Use Surname				
Card Expiry Date: Month / Year Card C.V.V(3 Digit security number on back of card )							
Signature:		Amount Auth	orized: \$				
Name on the Credit Card :							
To Post this Application:	PO BOX, 6020, Halifax Street, ADELAIDE, 5000						
To send via Email:	Membership Secretary:	Email: Mobile:	membership@jd 0404 999 200	csa.tidymail.	.co	<b>PTO</b> Pa	age 2



## JAGUAR, DAIMLER AND LANCHESTER VEHICLES CURRENTLY OWNED

Other make and models of classic cars are welcome on our Club Registration Scheme (If in doubt Please Ask) Please attach a list if insufficient space provided below

	Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4
Make				
Model				
Year				
Body Style				
Colour				
Engine Capacity				
Engine Number				
Chassis Number				
Registration Number				

The following information assists us as a club to improve our services to members.

What are your main reasons for seeking club membership? Any additional comments will be helpful

Social	
Technical Assistance	
Club Registration	
Sporting Events	
Club Magazine—Classic Marque	
Other	

Thank you for your application to join The Jaguar Drivers Club of South Australia.

We are very proud of our club's reputation as a very inclusive community of people of all ages and stages in life. We will endeavour to ensure you feel welcome and invite you to participate in events as promoted on our web page and our events page at <a href="https://jdcsa.tidyhq.com/public/schedule/events">https://jdcsa.tidyhq.com/public/schedule/events</a>

Your membership will be regarded as a TEMPORARY MEMBERSHIP and details posted in the next edition of the club magazine, Classic Marque. Following public notification your membership will convert to full membership. Our membership secretary will be in touch to confirm your membership.