

Membership Number

Alfa Romeo Owners Club of Australia (Queensland Division) Incorporated



Affiliated with CAAS

Application for Membership

Surname	Given Name	Preferred Name*	Sex	D.O.B
Your Name: _____			M F	/ /
Partner's Name: _____			M F	/ /
Children under 18 years of age:				
_____			M F	/ /
_____			M F	/ /
_____			M F	/ /

*for membership database and magazine mailing label use.

Contact Details:

Postal address: _____
 Suburb: _____ State: _____ Postcode: _____

Preferred Phone No: (nominate one) _____ Indicate type: home work mobile

E-mail:

Occupation: (not obligatory) Yourself: _____ Partner: _____

Vehicle/s: It would be appreciated if you could complete this section listing your Alfa Romeo/s, registered or unregistered.

Series	Year	Model	Engine cap	Registration No	Colour
Example: 105/115	1971	Spider Veloce	2000	SPI 105	Red

If insufficient space above, please attach a separate list.

Privacy: All information held is solely for AROCA use and will not be made available or sold to any company/person for non-Club use.

Fees: (as of July 2012)	\$	AROCA Membership year is 1st July to 30th June.
Join in July/Aug/Sept	70.00	Our Pro-rata membership fees allow members to join throughout the year and all Renewals fall due on our common due date of 1 st July.
Join in Oct/Nov/Dec	52.50	EFT, cheque or Money Order payments welcome.
Join in Jan/Feb/Mar	35.00	Bank of Queensland BSB: 124 007 Account No: 90 629 538
Join in April/May/June	17.50	

Contact between Members: (a) I understand that my **name and phone number** may be made available to other members to encourage and enable discussion on vehicle types, maintenance, restoration and all things relating to our common interest in the marque. (b) I understand I may receive **emails** from the Club regarding Club events and important notifications.

If you **do not agree** to this, please indicate with a "x" (Please refer to the Club website for our full Privacy Policy)

I wish to submit my application for membership of the Alfa Romeo Owners Club of Australia (Queensland Division) Inc, and, if accepted, agree to abide by the Constitution and Rules of the Club.

Signature: _____ Date: / /

OFFICE USE ONLY	PAYMENT \$		COMPUTER ENTRY: / /	
	RECEIVED BY MEMBERSHIP SECRETARY: / / Com Meeting <input type="checkbox"/> Club Night <input type="checkbox"/> e-mail from Secretary <input type="checkbox"/> Delivered by Secretary <input type="checkbox"/> Other <input type="checkbox"/>		FUNDS DEPOSITED: / / by Membership Secretary <input type="checkbox"/> BOQ Branch: EFT/advised by Treasurer <input type="checkbox"/> Other: <input type="checkbox"/>	
	CHEQUE Bank: _____ Branch: _____ Chq No: _____ EFT:	MONEY ORDER Issue office: _____ No: _____	CASH Per: _____	COMMENTS: MAGAZINES: JUL AUG SEPT OCT NOV DEC/JAN FEB MAR APR MAY JUN WELCOME PACK: / /

2012 Version by Jude Vaughan