



# MEMBERSHIP APPLICATION

1 April 2011—31 March 2012

NEW  RENEWAL

**Indemnity and Declaration**

This is to certify that I/we the undersigned, submit this application to become a member of the Tokoroa Kart Club Inc, and to compete in the clubs race and practice days at the Amisfield circuit Tokoroa. I/we hereby agree to indemnify the associations known as the FIA, the CIK, the MSNZ Inc, Kartsport NZ, MNZ Inc, all sponsors and all other members, officials, officers, assistants or helpers of any of the named or known organisations, against any injury or accident to myself, or any damage to my kart or equipment, whether in practice or competition.

I/we hereby declare I/we are fully conversant with current Kartsport New Zealand and Tokoroa Kart Club rules governing Kart racing. That my kart and driving apparel will be presented for examination to the standard and specifications required and that I will abide by all Tokoroa Kart Club and Kartsport NZ rules and any supplementary regulations which apply and the directions of the Stewards of the day without losing my right of appeal as per the rules.

I consent to the collection of the details below by Tokoroa Kart Club for the purpose of a membership record and for Tokoroa Kart Club to retain and disclose these to Kartsport NZ, SPARC, funding agencies and sponsors.

I acknowledge my right to access and correction of this information. This consent is given in accordance with the Privacy Act 1993

**MEMBER DETAILS (Please print clearly)**

**FAMILY NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE: Home** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**1 Name:** \_\_\_\_\_ **D.O.B (Juniors only)** \_\_\_\_\_ **Racing No** \_\_\_\_\_

**Racing Class** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**2 Name:** \_\_\_\_\_ **D.O.B (Juniors only)** \_\_\_\_\_ **Racing No** \_\_\_\_\_

**Racing Class** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**3 Name:** \_\_\_\_\_ **D.O.B (Juniors only)** \_\_\_\_\_ **Racing No** \_\_\_\_\_

**Racing Class** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**4 Name:** \_\_\_\_\_ **D.O.B (Juniors only)** \_\_\_\_\_ **Racing No** \_\_\_\_\_

**Racing Class** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**PARENTS/GUARDIANS:** Persons under 18 years must have parent/guardian confirmation of this application and indemnity, and must always be under the supervision of a person over 18 years during all private practice, official practice and competition.

**NAME OF PARENT/GUARDIAN** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

<input type="checkbox"/>	<b>FAMILY MEMBERSHIP:</b> All living at same address	<b>\$90.00</b>	<b>\$</b>
<input type="checkbox"/>	<b>SENIOR MEMBERSHIP</b>	<b>\$72.00</b>	<b>\$</b>
<input type="checkbox"/>	<b>JUNIOR MEMBERSHIP</b>	<b>\$48.00</b>	<b>\$</b>
<input type="checkbox"/>	<b>SOCIAL MEMBERSHIP</b> Any non driving	<b>\$25.00</b>	<b>\$</b>
<input type="checkbox"/>	<b>TRACK KEY FEE</b>	<b>\$30.00</b>	<b>\$</b>

**TOTAL FEES ENCLOSED: \$** \_\_\_\_\_

Please make cheques payable to Tokoroa Kart Club Inc, or, if you use internet banking our bank details are — ANZ Tokoroa 01 0461 0121788 00. Please put your name as a reference.

**PLEASE POST TO The Treasurer: Tokoroa Kart Club, PO Box 791, Tokoroa**

**OFFICIAL USE ONLY: Date:** \_\_\_\_\_ **Card No's :** \_\_\_\_\_ **Key:** \_\_\_\_\_ **Posted:** \_\_\_\_\_