



l,	, wish to become a member of the Model T Ford Club of Victoria In	c. In
consideration of the Club grantin	me membership, I agree to be bound by the rules of the Club.	
Signature	Date	
Please complete the following de	ails for the Club Register:	
Member / Owner details		
Street address		
Suburb.	Postcode	
Telephone No	Mobile No	
E Mail	Partner's Name	
Vehicle Details (if applicable)		
Year Body Type	Body Make Body Colour Body Colour	
Registration No	Engine No Club Permit No	
Last Safety Check Date	Vehicle Condition (eg. Original, Restored, Basket case)	•••
Subscription Pricing Options for 2	024/2025 (Please circle one):	
1. Emailed only newsletter, S	55.00	
2. Printed and emailed news	etter (additional \$33), \$88.00	
Payment Options:		
Option One: Pay the Treasurer in	person at the monthly Club Meeting, by cash or cheque.	
Ontion Two Pay by bank transf	rusing the following details (either in a bank or vie the internet) Note: Veu M	LICT
	r using the following details (either in a bank or via the internet). Note: You MI In the payment reference field so we can identify your payment. Email the Treasu	
·	you have paid, and either attach a scan of this completed form to the email, or p	

Option Three:

to the address below.

The Secretary

Pay by posting a cheque or money order, payable to "Model T Ford Club of Victoria (Inc)" (please follow this wording exactly), together with this completed application form, to the address below.

Deposit details: BSB: 083-004 **Bank:** National Australia Bank **Account Number:** 039230022 **Account Name:** Model T Ford Club of Victoria **Reference:** Please enter your surname and initial.

Address for completed application forms: Model T Ford Club of Victoria Inc

PO Box 383

Nunawading VIC 3131

Members are expected to serve on the Executive or Non-executive Committee at some stage.