

# Speedway Riders Association of SA Incorporated

A.B.N. 70556435984

## Membership Application Season 2024-25

Single Membership \$60 inc GST

Family Membership \$80 inc GST

**Family Membership includes, 2 adults, students up to 18 years, children up to 16 years.**

**Name:** ..... **Ridernet Number:** .....

**Mailing address** .....

**State** ..... **Postcode** ..... **Phone** .....

**Email address:** ..... **Date of Birth:** .....

**Name:** ..... **Ridernet Number:** .....

**Mailing address** .....

**State** ..... **Postcode** ..... **Phone** .....

**Email address:** ..... **Date of Birth:** .....

**Name:** ..... **Ridernet Number:** .....

**Mailing address** .....

**State** ..... **Postcode** ..... **Phone** .....

**Email address:** ..... **Date of Birth:** .....

**Name:** ..... **Ridernet Number:** .....

**Mailing address** .....

**State** ..... **Postcode** ..... **Phone** .....

**Email address:** ..... **Date of Birth:** .....

I hereby agree to abide by the Rules and the Constitution of the Speedway Riders Association of SA Incorporated.

**Signed** ..... **Date**.....

Return to **Secretary, P.O. Box 58, Mansfield Park 5012** , email [sra.gillman.sec@gmail.com](mailto:sra.gillman.sec@gmail.com)

Electronic transfer funds to **Speedway Riders Association of SA Incorporated, Commonwealth Bank, BSB 065-167 Account 10028320** Please put name and 'membership' to identify transaction.