



*Sports Car Club  
of New Zealand*

PO Box 100917  
NORTH SHORE  
AUCKLAND 0745

**APPLICATION FOR MEMBERSHIP OF  
THE SPORTS CAR CLUB OF NEW ZEALAND INC**

Please provide the following information, sign the application and forward with your remittance for the applicable fee/s to the address above, or by email to [secretarysccnz@xtra.co.nz](mailto:secretarysccnz@xtra.co.nz) . **For Fee scale** refer to **For Official Use** box below. **For Direct Credits**, please contact the Club Secretary for our bank account details:

Full Name of Applicant .....  
Full Postal Address.....  
..... Post code.....  
Phone (H)..... Phone (B)..... E-mail.....  
Occupation (optional)..... Date of Birth .....  
Next of Kin..... Next of Kin phone.....  
Names you would like to be addressed by..... Date of application.....

Sports or GT vehicle currently owned/building/restoring.....

If you are applying for Family Membership/s **as well as your Full or Associate membership** (see Club Constitution Section 5), please provide names of family members to which this applies and dates of birth.  
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The Club magazine "Sports Car Talk" is published quarterly and is distributed via email, if we hold an email address for you, or in paper form. Please indicate your preference: **Email** **Paper**

**UNDERTAKING**

I agree to abide by the Rules and Regulations laid down in the Constitution of the Sports Car Club of New Zealand Inc (hereinafter referred to as "the Club"). I further agree to abide by and obey any orders or directions given to me by any elected member of the Committee of the Club, its officials or their representatives, in respect of the Rules and Regulations of the Club.

Should any dispute arise between myself and the Club, its officials or their representatives. I will bring it in the first instance, to the attention of the Committee of the Club.

**APPLICATION OF THE PRIVACY ACT 1993**

Information on this application form is collected by the Sports Car Club of New Zealand Inc, for the purposes of providing statutory information to the Registrar of Incorporated Societies and for Club event registration. The Club is also required to disclose statistical information from this application to MotorSport New Zealand Incorporated and will also retain and use information from this application for the purpose of maintaining a Club magazine mailing list.

From time to time, the Club may wish to publish a Members List of names, contact details and vehicles. **Please indicate here if you wish to appear on that list** (circle): **YES** **NO**

I acknowledge my right under the Privacy Act 1993 to the access and correction of this information.

**Signature of Applicant**..... **Name** (print).....

Please give a brief outline of what you expect from the Club and the type of event you would be most interested in. Also what you could offer the Club (help at events, social, technical etc...)

**FOR OFFICIAL USE:**

Membership Fee: Full or Associate @ \$50.00/member. Family @ \$30.00/family member.  
Cash/Cheque/DC Club No/s Allocated .....Membership class/s..... Card despatched.....