



**Motorcycle Riders Association of SA Inc.  
MEMBERSHIP APPLICATION FORM**

WEB

PLEASE TICK APPROPRIATE BOXES AND CIRCLE OPTIONS:

New Member:  or Renewal  Membership No.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode

Telephone \_\_\_\_\_ Mob \_\_\_\_\_

Email \_\_\_\_\_

Join mailing list/s? SAMRATS  Scooter Club

Birthdate    Occupation \_\_\_\_\_

Gender M / F Blood Donor?  Please send info

Do you ride a Motorcycle  Scooter  Other

If family membership, 2<sup>nd</sup> cardholder name \_\_\_\_\_

Member of: Mid North / South East Register

Other Clubs?  Details: \_\_\_\_\_

Do not send Association magazine

I agree to abide by the Articles, Rules and the Constitution of the MRASA Inc.  
(Copy of the constitution available from the website or the Secretary)

Date \_\_\_\_ / \_\_\_\_ / 201\_\_ Signature \_\_\_\_\_

**MEMBERSHIP FEES: CIRCLE ONE**

**Standard**

Individual	Family	
\$25	\$35	1 Year
\$48	\$67	2 Years
\$72	\$99	3 Years

**Concession**

Individual	Family
\$21	\$29
\$40	\$55
\$60	\$83

Payment by: Cash/Cheque  Money Order  or debit my Visa  MasterCard

-     -     -

Amount \$ \_\_\_\_\_ - 00 Expiry date \_\_\_\_ / \_\_\_\_

Name as printed on card \_\_\_\_\_

Signature \_\_\_\_\_

Please make cheques or money orders payable to MRASA Inc.  
Send completed form to MRASA Inc. GPO Box 1895, Adelaide, SA 5001



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