



Hamilton Districts 4 Wheel Drive Club

Members Form

Name _____ Date _____

Address _____

Mobile _____ Home _____

Email _____

Medical Conditions _____

Emerg. Contact Name _____ Phone _____

Vehicle

Make _____ Model _____

Rego _____ Colour _____

☐ Road Legal

☐ Trailered

Drivers Licence # _____

Office Use Only

Annual Membership fee \$30 _____

1 April - 31 March

Association fee \$30 _____

Training attended

