

Cobra Car Club Of NSW Inc Membership Application Form

Please complete and mail with payment to:

Cobra Car Club of NSW

PO Box 3063,

Stockland Mall,

Wetherill Park, 2164

Name: _____

Partner's Name: _____

Address: _____ Postcode: _____

Phone: () _____ Work: () _____ Mob: _____

Fax: () _____

E-mail: _____

Occupation: _____

If you have a car or under construction;

Make (eg. Cobra DRB): _____ Model (eg. 1985): _ _ _ _

Rego: _ _ _ - _ _ _

Induction e.g. Turbo/ Supercharged, etc. _____

\$40 joining fee

plus

\$60 per year or \$30 per 1/2 year

1 year membership (1st July to 30th June)

1/2 year membership(1st Jan to 30th June)

Office use only.

Seconded by _____

Date joined _____

Membership number _____