

THE HISTORIC VEHICLE AUTHORITY OF NEW ZEALAND
THE VINTAGE CAR CLUB OF NEW ZEALAND (INC.)



APPLICATION FOR MEMBERSHIP/JOINT MEMBERSHIP

PROSPECTIVE NEW MEMBERS: Membership acceptance is subject to approval of the National Executive of the Vintage Car Club of NZ (Inc.) at its next meeting (March, August).

FULL MEMBER (Existing members adding a joint member, please write your name and membership number)

Surname Mr/Mrs/Ms/Miss _____ First Names _____
Birthdate _____

JOINT MEMBER(s)

Surname Mr/Mrs/Ms/Miss _____ First Names _____
Birthdate (Must be included if under 22) _____

Relationship to Full Member - Partner/Son/Daughter/Other _____
(Please refer to the Constitution for joint criteria.)

OR

JUNIOR MEMBER

Surname Mr/Mrs/Ms/Miss _____ First Names _____
Birthdate (THIS IS COMPULSORY) _____

ADDRESS FOR CORRESPONDENCE

STREET ADDRESS (if different)

Street: _____ Street: _____

Suburb: _____ Suburb: _____

City: _____ Post Code _____ City: _____ Post Code _____

Home () _____ Work () _____ Fax () _____ Email _____

Details of Club acceptable vehicles:

CONDITION TYPES O-Original and Roadworthy/R-Restored and roadworthy/U-Undergoing restoration/S-Stored/unrestored/ P-Parts/N-New

(Attach a list if preferred)

Make: _____ Make: _____ Make: _____ Make: _____

Year: _____ Year: _____ Year: _____ Year: _____

Model: _____ Model: _____ Model: _____ Model: _____

Body Style: _____ Body Style: _____ Body Style: _____ Body Style: _____

Condition: O R U S P N Condition: O R U S P N Condition: O R U S P N Condition: O R U S P N

Registration # _____ Registration # _____ Registration # _____ Registration # _____

Chassis #: _____ Chassis #: _____ Chassis #: _____ Chassis #: _____

Engine #: _____ Engine #: _____ Engine #: _____ Engine #: _____

Prior VCC VIC _____ Prior VCC VIC _____ Prior VCC VIC _____ Prior VCC VIC _____

I/We, the undersigned, do hereby make application to join the Vintage Car Club of New Zealand (Inc.) and do agree to further the objects of the Club in every way and to be bound and abide by its rules.

Applicant's Signature _____

Applicant's Signature _____

Proposer Name _____ M'Ship Number _____ Signature _____

PLEASE PRINT

Seconder Name _____ M'Ship Number _____ Signature _____

PLEASE PRINT

When complete forward together with fees of _____

To the Branch Secretary, P.O. Box _____

AFTER APPROVAL THE APPLICATION WILL BE FORWARDED ON TO THE NATIONAL OFFICE. CONFIRMATION OF YOUR MEMBERSHIP DETAILS WILL FOLLOW

CLUB CORRESPONDENCE – PRIVACY ACT

For the purpose of Club correspondence, compiling of membership lists, contact by similar interest enthusiasts, screened access to the commercial sector, address cross referencing by Vero Insurance. **Please Note:** No signature reflects your APPROVAL to allow your information be made available. **Suppression is of ALL information, which means your name etc will NOT appear on any membership lists. All information used for administration purposes.**

I/We agree to have personal information made available:

_____ FULL MEMBER

_____ JOINT MEMBER

_____ JUNIOR MEMBER

I/We wish to suppress my personal information for all but Club administration purposes:

_____ FULL MEMBER

_____ JOINT MEMBER

_____ JUNIOR MEMBER

FOR BRANCH INFORMATION

Please circle any areas of motoring or activity in which you are interested or would like to develop an interest.

Veteran Post War Motorcycle One marque Restoring Speed Events Vintage Post 1960
 Commercial Rallying History Post Vintage Military Historic Race Vehicles

Other _____

BRANCH SECRETARIES PLEASE COMPLETE THE REVERSE:

PASSED BY BRANCH SECRETARY

..... Branch..... Date.....
SECRETARY'S SIGNATURE

SECRETARY - FORWARD WITH PAYMENT TO THE NATIONAL OFFICE, P.O. BOX 2546, CHRISTCHURCH. WHEN PROCESSED, THE FORM WILL BE RETURNED FOR YOUR RECORDS.

OFFICE USE

MEMBER DETAILS

Member No.
Branch No.....
Expiry Date:.....
Processed Date:.....

PAYMENT DETAILS

Head Office:..... Branch:.....
Joint:..... Joint:.....
Joining Fee: Joining Fee:.....
GST: GST:.....
SUBTOTAL: SUBTOTAL

TOTAL:

**THIS APPLICATION MUST BE SENT TO THE BRANCH YOU
WISH TO JOIN, ALONG WITH THE RELEVANT FEES, FOR
APPROVAL**

Branch contact details are updated on the Clubs Website at www.vcc.org.nz

The Club can accept Visa and Mastercard however there is a 3% bank fee on all credit card payments:

Name on Card: _____

Credit Card Number: _____

Expiry Date: _____

Signature: _____

**BRANCH TO CONFIRM QUOTED PAYMENT PRE 3% FEE, WHEN
PAYING BY CREDIT CARD**

\$ _____