



**SUBARU**  
**4WD CLUB OF SA INC.**  
 Established 1976

**Membership  
 Application**

Applicant Name .....

Address .....

Postcode .....

Telephone .....

Mobile .....

(“Bullsheet” to be emailed monthly) Date of Birth .....

Email Address .....

Please tick here if you DO NOT want your details available to other club members

Interests .....

Partner's Name .....

Partner's Date of Birth .....

**FEES:**

Joining Fee: \$15  
 Metro: \$60  
 Country: \$50

Children's Names .....

Children's Dates of Birth .....

Anniversaries .....

**Renewals Due:**

1st meeting in July each year  
 (AGM)

If you are a **new member**,  
 please do not send any money  
 just yet.  
 Your application will need to be  
 approved by the committee  
 first.

**Vehicle Details**

Make .....

Model .....

Year .....

Colour .....

Rego .....

Insurance Company .....

4WD Experience: None  Average  Good

Radio: UHF  AM

HF  None

**WARNING**

**Four Wheel Driving can be dangerous. Any person, member or otherwise, four wheel driving, learning to four wheel drive, undergoing four wheel drive training, riding in a vehicle being used for or in conjunction with four wheel drive training, or participating in any activity carried on by the Subaru 4WD Club of SA Inc. do so entirely at their own risk.**

I, the applicant, have read or had read to me the above application and warning, and having understood same, consent to its requirements.

Signed: ..... Date: .....

Subaru 4WD Club of SA Inc  
 ABN 97 484 983 112  
 Postal Address:  
 c/- 23 Yulinda Terrace  
 PARA HILLS SA 5096  
 Email: [subaru4wdclub@gmail.com](mailto:subaru4wdclub@gmail.com)

Received by: ..... Date: .....

\*A new membership form must be submitted and signed every year\*

For Direct Transfer Payments: Subaru 4WD Club Inc.  
 BSB: 085-183  
 Acc No.: 508 013 961