**LEVIN RACING CLUB (INC)**

[www.levinracingclub.co.nz](http://www.levinracingclub.co.nz)

**P O Box 73 Telephone 06 367 9375**

**LEVIN Fax 06 367 9305**

 **Cell Phone 027 554 4072**

 **Email** **levinracingclub@xtra.co.nz**

**APPLICATION FOR MEMBERSHIP**

**Annual subscription $45.00**

**Name………………………………………………….**

**Address……………………………………………….**

**………………………………………………………..**

**………………………………………………………..**

 **Email ……………………………………………….**

 **Phone ………………………………………………**

**Proposer.............................................**

**Seconder……………..………………**

**I HEREBY AGREE TO BE BOUND BY THE RULES, BY-LAWS,**

**AND REGULATIONS OF THE LEVIN RACING CLUB (INC).**

**Signature of applicant………………………………**