



2022-2023

ACN: A0019682U ABN: 36938088106

**Daylesford Speedway Drivers Association Incorporated**

**Title :** \_\_\_\_\_ **NAME :** \_\_\_\_\_ **D.O.B** \_\_\_\_\_

**ADDRESS :** \_\_\_\_\_

\_\_\_\_\_ **STATE :** \_\_\_\_\_ **POSTCODE:** \_\_\_\_\_

**EMAIL :** \_\_\_\_\_

**Phone:(H)** \_\_\_\_\_ **(M):** \_\_\_\_\_

**Class:** \_\_\_\_\_ **Car Number:** \_\_\_\_\_ **Log Book No:** \_\_\_\_\_

**AMBULANCE FUND NUMBER :** \_\_\_\_\_ **EXP :** \_\_\_\_\_

**Single Driver: YES / NO \$50 Date of Birth: \_\_\_\_\_ Driver YES / NO**

**Life Member: YES / NO \$10 Date of Birth: \_\_\_\_\_ Driver YES / NO**

**Family Member Details: \$70 (2adults & 2 children under 16yrs)**

**Spouse: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver YES / NO**

**Children: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver YES / NO**

**Children: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver YES / NO**

I understand that if my application is accepted, to abide by the rules and regulations governing the Daylesford Speedway Drivers Association Inc. I also understand that family members can only be a spouse and children under 16 yrs of age.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_

**Direct Debit: BENDIGO- BSB:633-000 Account: 187-046-073. Please place your name as details if paying by Direct Debit**  
**Date Paid: \_\_\_/\_\_\_/\_\_\_ Membership Number: \_\_\_\_\_**

**Return To: Daylesford Speedway Club Treasurer/Secretary P.O Box 459 Lara, Vic 3212**

**Amount received: \_\_\_\_\_ Date received: \_\_\_/\_\_\_/\_\_\_ Received by: \_\_\_\_\_**



Daylesford Speedway Drivers Association Inc.

Photo Release Form for Minors (under 18)

I (Name) \_\_\_\_\_ of, (Address) \_\_\_\_\_, hereby give, Daylesford Speedway Drivers Association Inc., permission to use any photograph or video taken of my child whilst participating in club activities at the Daylesford Speedway Track or at any other club event outside of the Daylesford Speedway Track to publicly promote the Club.

I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian's signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

**Photo Release Form for Adults**

I (Name) \_\_\_\_\_ of, (Address) \_\_\_\_\_, hereby give, Daylesford Speedway Drivers Association Inc., permission to use any photograph or video taken of myself whilst participating in club activities at the Daylesford Speedway Track or at any other club event outside of the Daylesford Speedway Track to publicly promote the Club.

I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

