



Licensing Officer
 161 North Rocks Rd
 North Rocks NSW 2151
 Ph:0404 881 151
 Email: form@teka.com.au
 Website: www.teka.com.au

MEMBERSHIP APPLICATION

I hereby apply for membership/membership renewal of The Endurance Karting Association Incorporated (TEKA). In the event of my admission as a member I agree to be bound by the current rules of the association. Membership is for a competitor is for 12 months from the date of issue of an AKA licence. For TEKA Membership only (with no AKA licence) membership is for the calendar year. *

*Jan 1st – Dec 31st, if application received after November 31st, membership expires on December 31st of the following year.

First Name(s):		Surname:	
Address:			
Suburb/Town:		State:	Postcode:
Home:		Mobile:	
Work:		Fax:	
Email:			
Date of Birth: / /		New Members Only	
Signature of Applicant			
		Print Name:	
Date:		Date:	

TYPE OF MEMBERSHIP (Please tick/circle)

- | | | |
|--|--------|--------------------------|
| TEKA MEMBERSHIP ONLY | 50.00 | <input type="checkbox"/> |
| TEKA MEMBERSHIP + NEW AKA LICENCE | 345.00 | <input type="checkbox"/> |
| TEKA MEMBERSHIP + AKA PRACTICE LICENCE | 156.00 | <input type="checkbox"/> |

If paying by cheque, please make cheques payable to The Endurance Karting Association

CREDIT CARD PAYMENTS TYPE OF CARD (Please tick)

- VISA BANKCARD MASTERCARD

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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EXPIRY DATE CIV

AMOUNT \$ _____

NAME ON CARD _____

SIGNATURE OF CARDHOLDER _____