



CENTRAL COAST DIRT RIDERS

2007 Membership Form

Post to
60 Morgan Avenue, Tumbi Umbi NSW 2261
www.ccdr.com.au - info@ccdr.com.au

First Name/s: _____ Surname: _____

Nickname/s: _____ Date of Birth: _____

Address: _____

Postcode: _____

Phone Numbers: (Mobile): _____

(Home) _____ (Fax) _____

Email Address: _____

Please note: All news letters are by email only so to keep up to date please make sure you provide an email address, sms will also sometimes be sent out.

MEMBERSHIP FEE: \$30.00 Date Posted: _____

Registered Riders Number: _____ Preferred Riders Number: _____

GRADE: PRO/EXPERT A GRADE B GRADE C GRADE OVER 35's

SPONSOR/S: _____

MA LICENCE NUMBER: _____ Expiry Date: _____

Preferred Events:

Enduro Cross Country Grass Track Trail Rides Short Circuit Sprint Moto X Pony Express

I, the undersigned, hereby make application for membership to the Central Coast Dirt Riders Inc Motorcycle Club. In doing so I undertake to abide by the rules and regulations of the club and the GCR's as set down by Motorcycling New South Wales. I hereby indemnify the Central Coast Dirt Riders Inc, its officials, committee members or any other persons acting on their behalf against any and all liabilities for death or personal injuries and/or loss of damage caused by negligence or otherwise arising out of my involvement in club meetings or events or activities.

SIGNED _____ DATE: _____