VINTAGE CHEVROLET ASSOCIATION OF QUEENSLAND INC.

**NEW MEMBERSHIP FORM 2024/2025**

New Members joining 1st January 2025 to 30th June 2025 - Half Annual amount.

See conditions of Membership on reverse hereof [www.vintagechevclubqld.org](http://www.vintagechevclubqld.org) Email:*vcaqmemsec@gmail.com*

**ABN: 43 458 227 263**

**Surname**............................................ **Single & Family Membership due 1st July** $50-00

**First Name**...............................................................................................................................

**Partner Member's Name** ……………......................................................................................

1. **Child Member Name (age less than 18 years)** ……………...............................................
2. **Child Member Name** …………….........................................................................................
3. **Child Member Name** …………….........................................................................................
4. **Child Member Name** …………….........................................................................................

**Address** ..................................................................................................................................

........................................................................................................ **Postcode** ......................

**Home phone** ................................................ **Mobile** ...........................................................

**email** (essential for you to receive electronic newsletters etc)

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I/we the undersigned hereby apply to join the Vintage Chevrolet Association of Queensland Incorporated subject to its Rules of Association the obligations of which I/we accept. I/we agree to pay the subscription for the time being in force. I/we am/are aware that my/our details above will be published in the Club Register which is for Club Members only. I/we undertake not to supply other Member's details to non-members or organisations.

**Member's signature ….........................................................................................................**

**Partner Member's signature: ................................................. Date: ............/............/2024**



Details of your Chevrolet vehicle/s

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| --- | --- | --- | --- | --- | --- |
| Year | Body Style | Model | Series | Condition | Regn No. |
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**Membership Classes**

Membership of the association is open to all persons owning or interested in any Chevrolet motor vehicle manufactured up to the 31st December of the 30th year prior to the present year, according to the following membership classes–

1. Single membership: any adult person, who enjoys all the privileges of membership including voting rights and is entitled to receive a copy of the association’s periodical;
2. Family membership: any one or two adults and all children less than 18 years of age residing at the same address; each adult enjoys all the privileges of single membership but receive only one shared copy of the association’s periodical; the children members have no voting rights; and
3. Child membership: any person less than 18 years of age not otherwise eligible as a family member; such persons enjoy all the privileges of membership except voting rights and are entitled to receive a copy of the association’s periodical. Children falling into this class please contact the Association for further information regarding membership.