



West Coast Outlaw Karts Incorporated



WEST COAST OUTLAW KARTS

ABN

NAME: _____ Date of birth: _____

TEAM NAME: _____

ADDRESS: _____

_____ POST CODE: _____

PHONE (H): _____ MOBILE: _____

MEMBERSHIP NUMBER: _____ EMAIL: _____

CLASS: (Beginner box stock) (Box stock) (250cc Intermediate) (450cc Outlaw)

Please circle your choice.

| | |
|--|---------|
| Senior Driver Membership _____ | \$65.00 |
| Junior Driver Membership _____ | \$20.00 |
| Full Member Mechanic/Official _____ | \$35.00 |
| Junior mechanic _____ | \$10.00 |
| Social Member (No voting rights) _____ | \$20.00 |
| Kart Registration (including examination and log book) _____ | \$35.00 |

Kart Racing Number. _____ TOTAL: _____

All junior members must have a parent or guardian as full members.

WCOK Inc. reserves the right to examine all karts. A log book will be issued once the vehicle has passed examination and all fees are paid.

Speedway Australia license is required – circle one.

Driver Mechanic Official

Senior classes require B license (\$210)

Junior classes require JD license (\$120)

SA Licenses can be obtained from. <https://www.speedwayaustralia.org/>

SA license number if known at time of application: _____

PASSPORT
PHOTO
HERE

ADULT GUARDIAN CONSENT AND INDEMNITY (if the Driver is under 18)

I

Christian name (of Guardian) Surname (of Guardian)

Of

Address (of Guardian)

Relationship to Driver

I request West Coast Outlaw kart inc, to let the Driver take part in go karting and other activities and I give my consent to the Driver doing so. In exchange, I confirm that I have read and understand this Membership Form and on behalf of the Driver, I make the acknowledgements, enter into the agreements and give the authorizations and promises contained in it. I also agree to personally accept liability for and to indemnify and keep West Coast Outlaw Kart Inc indemnified against any claims and costs brought by the Driver against West Coast Outlaw kart Inc or brought against West Coast Outlaw kart Inc which arise out of the Driver's negligence or recklessness.

Signature (of Guardian) Date of Birth (of Guardian) Today's Date

MEMBER DECLARATION: (To be read and signed by member).

By payment of the appropriate fees above, I recognise that I am duly bound by the Constitution of WCOK Inc., their Code of Conduct, Rules and Regulations, all of which I have read and understand. I agree that the continuation of my membership of this club is subject to my compliance at all times with this declaration.

SIGNATURE:

DATE:

Return forms to Secretary, WCOK Inc.

Email: westcoastoulaws@outlook.com

Payment to west coast outlaw karts incorporated

BSB 066115

Account Number 10968698

OFFICE USE ONLY: Application approved

Rec'd Rec. No.

Card Issued: Lic. No.: