



Riley Motor Club Qld. Inc. (5135)

(Club Treasurer)

Member

I hereby make application for membership of the Riley Motor Club, Qld. Inc

Surname: First name(s):

Address:

Post Code:

Telephone:

Email Address:

Signature:

Date:

Associate Member (If Applicable)

Surname: First name(s):

Address:

Post Code:

Do you require your Newsletter to be sent by Email: Please Tick one of the boxes
Post:

(Club Registrar)

Surname: First name(s):

Address:

Post Code:

Telephone:

Vehicle Details (If available)

Model/year:

Engine Number:

Chassis Number:

Registration Number:

Colour:

Please provide a photograph for inclusion in the Club Register.

If necessary attach a separate sheet for additional vehicles or projects.