



Council of Motor Clubs Inc.

GPO Box 3954
Sydney NSW 2001 Australia
www.councilofmotorclubs.org.au

ANNUAL AFFILIATION RENEWAL FORM - 1st January 2020 to 31st December 2020
For the use of clubs currently affiliated with the CMC only.
THIS IS YOUR TAX INVOICE

Please print all information clearly, particularly email addresses. It is important for Council to maintain accurate, up-to-date information. Therefore, please **read the form** carefully and do not write **"as before"** in answer to the questions asked. All information held by the CMC is bound by current privacy regulations.

**PLEASE BE AWARE THAT IF YOUR AFFILIATION REMAINS UNPAID AT 31ST MARCH, 2020
YOUR CLUB'S CMC MEMBERSHIP HAS LAPSED AND
THEREFORE YOUR CLUB IS INELIGIBLE TO APPLY FOR THE 2020 SHANNONS SYDNEY CLASSIC**

Please use the complete formal name of your club without initials.

Club Name: _____ Incorporation No. _____
Postal Address: _____ Post Code: _____
Website (if available): _____
Contact Person's Name: _____ Position: _____
Telephone: Home: _____ Work: _____ Mobile: _____
Contact Person's Email address _____ Download minutes: Yes No

**To download minutes go to www.councilofmotorclubs.org.au
select "CMC Docs" then select "GM & AGM Minutes".**

If you are genuinely unable to download, we will send them via email to one only nominated email address.

CMC Delegates: Please list the **details** of **two delegates** who will attend CMC general meetings

Delegate 1 Name: _____
Email Address: _____
Telephone: Home: _____ Work: _____ Mobile: _____

Delegate 2 Name: _____
Email Address: _____
Telephone: Home: _____ Work: _____ Mobile: _____

Please supply the following details, as it will assist the Council in dealing with Government, RMS, NGOs and other organisations. This especially applies to The AHMF in its dealings at the Federal level.

Number of members (including associates, etc.) in New South Wales: _____
Approximate number of vehicles covered by your Club in New South Wales: _____
Number of vehicles on Conditional Registration (HVS & CVS) in New South Wales: _____
Age range of vehicles in your Club: 19 _____ to 20 _____

Fees are based on the number of Members in your Club and are payable by 31st December, 2019.
Renewal Payment must be made by 31.12.19 if Club has CVS. If not, your Club's CVS registration is void.

Up to 50=\$35 51-100=\$60 101-150=\$90 151-200=\$120 201-250=\$150 251-300=\$175 Over 300 =\$205

CMC Bank Details: A/c Name: Council of Motor Clubs BSB: 633 108 A/c No: 1233 73078 (Bendigo Bank)

Please forward your direct debit receipt with this form to The Secretary, GPO Box 3954, Sydney 2001, or email to cmc.nsw.finance@gmail.com

(Council use only)

Date Received _____ Amount: \$ _____ Cheque No: _____ EFT Rec No: _____
Database & mailing address updated: _____