

ADELAIDE SUPERKART CLUB Inc.

2025 Membership Application Form

Secretary: lan Williams ph 08 8340 9288 email: iwt@iwt.com.au Website www.superkartclubsa.org Membership Officer Adelaide Superkart Club Inc PO Box 202 Kent Town DC SA 5071

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Name:	Date of Birth//
	Postcode:
Phone: (H) Mobile	<u> </u>
Email :	
Family Membership / other Licence Holders	
Name:	Date of Birth//
Phone: (H) Mobile	·
Email:	
Name:	Date of Birth//
Phone: (W)(H)	Mobile
Email :	
	Date of Birth//
Phone: (H) Mobile	
Email:	
	ips are applicable from January 1 st to December 31 st
	0 ☐ Family \$300 ☐ Junior (under 16) \$150
☐ Associate \$50	
☐ Interstate \$0 I am a member of interstate	e Superkart Club :
Membership Fee paid by: EFT CI	HEQUE CASH
EFT : Adelaide Superkart Club Inc BSB 035 050 Acc 370245 (plea Date transferred:	se include your name as reference) Amount paid: \$
What class of Superkart do you race?	
☐ Junior Rotax ☐ Senior Rotax ☐ St	ock Honda 🔲 125cc Gearbox 🔲 250cc Gearbox
Your previous kart number was Do yo	ou wish to retain this number for 2025 ? Yes No
Applicant's Signature	

^{*} Family Membership is for up to 3 members of the same family living at the same address

^{*} Life members are not required to pay a fee, but are requested to return a Membership Application Form with current contact details