



OKANAGAN AUTO SPORTS CLUB

PO Box, 2467, RPO, Kelowna, BC V1X 6A5

2010 Membership Form

Name:

Spouse: not applicable if applying for a single membership

Address:

City:

Prov/State: Postal Code/Zip

Home phone number: ()

Work phone number: ()

Fax #: ()

Cell # Pager #

Email:

Are you a Drag Racer YES NO

IF YOU HAVE CHILDREN THAT FALL INTO THIS AGE CATEGORY, THIS BOX MUST BE FILLED OUT COMPLETELY, OR YOUR APPLICATION WILL BE RETURNED AND YOUR MEMBERSHIP COULD BE DELAYED.

(this applies to dependents ages 11-18, living at the same address listed)

** Anyone older must apply for their own individual membership

Name:

Date of Birth: month day year

Name:

Date of Birth: month day year

Name:

Date of Birth: month day year

Name:

Date of Birth: month day year

Would you be interested in helping the Drag Race division throughout the upcoming race season.

Work Parties: YES () NO () **Volunteering at an Event:** YES () NO ()

If yes to either, please fill out a Volunteer Application.

<u>MEMBERSHIP</u> (I YEAR)	<u>AFTER AUG. 31/2010</u>	
Single (incl. \$2.70 GST)	\$56.75	(\$28.38) \$
Family (incl. \$3.71 GST)	\$78.00	(\$39.00) \$
<small>(incl. dep. 18 & under residing at same address)</small>		

Please make cheque payable to **OASC** TOTAL MEMBERSHIP \$

Paid: Cash ()

Cheque # _____ ()

Date _____

Payment taken by _____

FOR MORE INFORMATION CONTACT MEMBERSHIP CHAIRPERSON

Genie DePlonty at (250)766-5532

or email: genied@thundermountainraceway.com