Ulysses Club Inc.

PO BOX 3242, NARELLAN NSW 2567
Phone: 1300 13 4123 Fax: 02 4647 7740
Email: administration@ulysses.org.au
Web Site: www.ulyssesclub.org
A.B.N 25 637 297 337 ARBN 116 090 101

MEMBERSHIP APPLICATION FORM
(AUSTRALIAN RESIDENTS)

Name: ..... Date of Birth……./……../ 19……

Postal Address: ……

Post Code ……..... Telephone (……...)……..…….... Mobile ……...……..……

Email Address……..

If you are applying as a spouse/partner, please state your spouse/ partner's Ulysses Club Membership # ……..... *(Spouse/partner is generally held to mean husband or wife, putative spouse or de-facto husband or wife, or full time partner (not business partner).*

Important - Please read **It is necessary for all membership applications whether through a Branch, the Ulysses Club's website or direct to the Administration Office to have attached a photocopy of the applicant's motorcycle rider's licence OR a statutory declaration signed before a Justice of the Peace, stating date of birth and confirmation of a current motorcycle licence**.

Where the application is made electronically, copies of proof of both age and licence details must be sent to the Administration Office as soon as possible for the application to be processed.

If you are applying as a spouse/partner you must be the spouse/partner of a current Ulysses Club Inc. member and be 40 years old or over. **Please attach your proof of age to enable your application to be processed.**

Applications with Learners Permit/Licence will be accepted conditional upon the applicant attaining their full motorcycle licence within 12 months.
The application will not be processed until the relevant information is received.

I enclose

Joining Fee	$30.00	**Mandatory**
3 Year Subscription	$90.00	**Mandatory**
The Ulysses Story	$12.00	Optional
Total Enclosed	**$**	

Branch Stamp
(Only if applying through a branch)

Ulysses Club Inc.
Cotton Country Cruisers Moree Branch

PLEASE DO NOT POST CASH

By signing below I acknowledge and understand that this application does not guarantee my acceptance as a member of the Ulysses Club and is subject to ratification by the Club's National Committee. If accepted I agree to abide by the Constitution of Ulysses Club Incorporated and uphold its principles.

Signed……..Date……../……/20…..

*** How did you hear about Ulysses Club Inc? _____

Methods of payment: **(do not send cash)** ☐ Cheque or Money Order ☐ Visa Card ☐ MasterCard

Credit card number: ☐☐☐☐/☐☐☐☐/☐☐☐☐/☐☐☐☐ **Expiry date: /**

Cardholder's Name: Signature:

Any enquiries regarding this application please contact the Administration Office on 1300 13 4123 or email: administration@ulysses.org.au
(Printed August 2010)