



**NORTHWEST MOTORCYCLE RIDERS ASSOCIATION
OF TASMANIA (INC)**
P.O. BOX 762, BURNIE, TAS 7320.
www.mratasinc.com.au 0418 552923

Membership Application or Renewal Form

New Member or Membership Number (renewal) _____

PERSONAL DETAILS

Surname	Given Names
Postal Address	
Residential Address	
Email Address	
Date of Birth	
Phone No	Mobile No
Bike(s) Owned	

FAMILY MEMEBERSHIP DETAILS

Partners Name:	DOB
Childs Name(s):	DOB

MEMBERSHIP TYPE

SINGLE MEMBERSHIP	No.....	at \$25 per annum	\$.....
FAMILY MEMBERSHIP		at \$35 per annum	\$.....
		TOTAL	\$.....

Notes:

Please make cheques payable to "Northwest MRA Tasmania Inc"
All memberships fall due on the first of October each year.
A 50% discount applies where membership starts after 1st April.

I hereby agree to the aims and objectives of the MRA and state that I will uphold its good name

Signature.....

Date ___/___/___