



Military Vehicle Collectors Australia Incorporated
PO Box 1371
Caboolture Q 4510

Email: committee@mvca.com.au
WWW: www.mvca.com.au

MEMBERSHIP APPLICATION FORM – A01.03

Title: _____ First Name: _____ Surname: _____

Street Address: _____ City: _____

State: _____ Post Code: _____ Country: _____

Phone: _____ Email: _____

If you are a member of the MVCA forum, what is your user name _____

Vehicle Details if application includes access to Concessional Registration Scheme:

Make: _____ Model: _____

Year: _____ Circle LHD or RHD Registration Number: _____

Engine No: _____ Chassis no / VIN: _____

If more vehicles owned / registered, please attach a list.

I agree that my contact details may only be published each year with a list of Members in MVCA Inc. Publication. Circle YES or NO

Fee Schedule – membership fee is pro-rated to joining date as all memberships expire 30th April

1st May through to 31st July - \$40	1st August thru to 31st October - \$30
1st November 31st January - \$20	1st February thru to 30th April - \$10

I have enclosed the required payment of \$ _____

ALL cheques etc should be marked payable “MVCA Incorporated”

Date ____/____/____ SIGNATURE _____

Please return completed form and payment to:

THE SECRETARY, MVCA Inc.
PO. BOX 1371, Caboolture, Queensland, Australia 4510