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2024 APPLICATION/ RENEWAL MEMBERSHIP FORM

| | | | | |
|------------------|--|--------|--------|-------|
| Name: | | | | |
| Surname: | | | | |
| Date of Birth: | | | | |
| MSA Licence No.: | <i>*Please attach a copy of your 2024 MSA licence.</i> | | | |
| Golf Shirt Size: | | | | |
| E-Mail: | | | | |
| Cell Phone: | | | | |
| Phone: | () | (h) | () | (w) |
| Fax: | () | | | |
| Make: | Model: | Car #: | Class: | Year: |
| | | | | |

I apply for membership of Extreme SuperCars. All participants of the series **MUST** be members of the club to participate and need to hold the minimum of a national status license.

2024 Annual Subscription/ Admin Fee of **R 3 500** is payable into the following Account.

2024 One Event Subscription/ Admin Fee of **R 700** is payable into the following Account.

EXTREME SuperCars: ABSA Edenvale
 Branch Code: 630 642
 Account No.: 405 885 3538

PLEASE NOTE: This membership does not entitle you to discount on practice sessions or race entry fee.

Signed at on this day of 2024

Signature:

| FOR OFFICIAL USE ONLY | |
|--|--------------------|
| Membership paid - Cash/EFT/Credit Card | R Date |
| Membership No.: | |

Please mail membership form, proof payment with your name as ref and 2024 MSA licence to events@zwartkops.co.za