



MOTO GUZZI CLUB OF QUEENSLAND INC

PO Box 1159
Fortitude Valley QLD 4006
www.motoguzziclubqld.org
info@motoguzziclubqld.org

2010 Membership Application

Name Surname: _____

Given Name: _____

Contact Details

Street / PO Box: _____

Suburb & Postcode: _____

Email: _____

Home Phone: _____

Mobile Phone: _____

Bike Make & Model: _____

Declaration

By submitting this membership application form, I hereby agree to abide by the rules and regulations of the Moto Guzzi Club of Queensland Inc.

Membership Fee

New Member (\$30) *includes 1st year's membership*

Membership Renewal (\$20)

Signature & Date

Date: _____

Please forward the completed form, with the appropriate membership fee, to the Moto Guzzi Club of Queensland.