

ATLANTIC REGION MOTOR SPORTS INC.



AFRA	1601 Lower Water Street, Suite 103, Halifax, NS B3J 3P6
AMKA	606 Meadowvale Road, Kings County, NS B0P 1R0
ASCC	PO Box 31120, Halifax, NS B3K 5Y1
BAC	PO Box 2724 DEPS, Dartmouth, NS B2W 4R4
CKRA	150 Wynwood Drive, Moncton, NB E1A 2M6
FMC	306 Fulton Avenue, Fredericton, NB E3A 2C3
IKC	c/o Trent Booker, RR 3, Hunter River, PE C0A 1N0
MMSC	PO Box 422, Moncton, NB E1C 8L4
NBIKC	PO Box 68, Fredericton, NB E3B 4Y2
NBSCC	PO Box 23018, Saint John, NB E2J 4M3
TNMC	PO Box 13142, Station A, St. John's, NL A1B 4A4
VMI	PO Box 1392, St. John's, NL A1C 5N5

PLEASE FORWARD YOUR APPLICATION TO YOUR CLUB ADDRESS

APPLICATION FOR CLUB MEMBERSHIP

CLUB *(Please Indicate club joining):* _____

NAME: _____

ADDRESS: _____

PHONE *(hm):* _____

EMAIL *(If applicable):* _____

INTEREST: RACE ICE RACING RALLY AUTOSLALOM AUTOCROSS
 KARTING

ADDITIONAL FAMILY MEMBERS AT THE SAME ADDRESS:

(These members must be paid at time of application)

1. _____

2. _____

3. _____

4. _____

MEMBER'S SIGNATURE: _____ **DATE:** _____

CLUB/REGION USE ONLY *(ARMS Membership Dues Calculation)*

of CLUB MEMBERS: _____ X (\$ ARMS LEVY) - \$

CLUB OFFICIAL (SIGNATURE): _____

MEMBERSHIP TYPE: RENEWAL NEW

BY COMPLETING AND SIGNING THIS MEMBERSHIP APPLICATION, YOU AGREE TO BE BOUND BY THE RULES AND REGULATIONS OF YOUR CLUB AND ATLANTIC REGION MOTOR SPORTS INC. (Affiliated with ASN Canada FIA)