

Membership
Application



2023
Jan 1st, 2023 – Dec 31st, 2023

NOTE: MHARA WILL KEEP ALL INFORMATION STRICTLY CONFIDENTIAL

ALL MEMEBERSHIP APPLICATIONS MUST BE SUBMITTED EITHER BY EMAIL to MHARA.secretary@gmail.com, IN

PERSON TO THE SECRATARTY, OR MAILED TO P.O. BOX 849 Med Hat, AB T1A 7G7

*E-Transfers send to MHARA.treasurer@gmail.com. Password - Alberta
All cheques made payable to MHARA. Credit card: Call 403-458-8087*

Membership Cost is \$60 (1 adult membership free with each youth membership)

NAME: _____

ADDRESS: _____ CITY: _____

PROVINCE/STATE: _____ POSTAL CODE: _____

TELEPHONE: (cell) _____ (cell) _____

Email: _____ BIRTHDATE: (MM/DD/YYYY) _____

I accept and agree to follow the MHARA bylaws, track rules and policies and class rules as published and amended from time to time. I further agree that I will do my best to participate in a sportsmanlike manner and help whenever possible at club events and functions.

APPLICANT'S LEGAL SIGNATURE (Parent or Guardian if under 18) (in ink) _____

PRINTED NAME: (in ink) _____

DATE: (MM/DD/YYYY) _____



PERSONAL INFORMATION CONSENT

2023
Jan 1st, 2023 – Dec 31st, 2023

By providing personal information to the Medicine Hat Auto Racing Association, the applicant consents to Medicine Hat Auto Racing Association's collection, retention and disclosure of that information for any and all purposes and uses as permitted or contemplated under the above-described membership application and as needed to comply with any legal requirements.

APPLICANT'S LEGAL SIGNATURE (Parent or Guardian if under 18) (in ink) _____

PRINTED NAME: (in ink) _____

DATE: (MM/DD/YYYY) _____

YOU MUST COMPLETE REVERSE SIDE OF THIS APPLICATION

