

SHORT CIRCUIT MOTOR SPORT ASSOCIATION INC

Servicing motorsport in Queensland since 1977

PO Box 2456
Toowoomba Qld 4350
ABN 52 502 752 630



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SCMSA MEMBERSHIP APPLICATION FORM

Application For → New Membership ☐

Membership Renewal ☐

Please Note: For the 2026 year there is one membership classification for all members.

- The membership fee is the same for all members..
- There will be no Short Circuit fees collected or numbers issued for 2026.
- Each member will be issued a membership card for the year

2026 Membership Fee is \$30.00.

NAME: _____

ADDRESS: _____

POSTCODE: _____

PHONE NUMBER (night) _____ (work) _____ (mobile) _____

EMAIL: _____

I, the above named hereby make application to the SHORT CIRCUIT MOTOR SPORT ASSN. for membership.

I, understand that the application does not guarantee membership.

I, agree to be bound by the rules of the constitution of the SHORT CIRCUIT MOTOR SPORT ASSN. .

SIGNATURE OF APPLICANT _____ DATE ____/____/____

NOMINATED BY _____ SIGNATURE _____
(Only required for new members)

If you are paying by cheque please make payable to the S.C.M.S.A. (Short Circuit Motor Sport Association.)
Payments can be made by **EFT: BSB 034 221 Account Number: 231094** Reference: Your name and membership

Please complete this form and mail it to:-

or

Scan and email to:-

Membership Officer SCMSA

eventsecretary@scmsa.com.au

PO Box 2456 Toowoomba QLD 4350

Official Use

App Received Date ____/____/____ Payment received Date ____/____/____ AMOUNT PAID \$ _____

MEMBERSHIP APPROVED YES NO Card Issued DATE ____/____/____ MEMBERSHIP NO _____