WHITCHURCH MOTOR CLUB

Membership no.

W.A.M.C : A.N.W.CC : A.W.M.M.C
Membership Application Form

Name _____

Address _____

_____

Postcode _____

Telephone _____

Email _____

I hereby apply for membership of the above Club and if elected agree to be bound by the Club Rules, attend the General Meeting of the Club as regularly as possible and assist the Club to the best of my ability.

I enclose herewith PO/Cheque/Cash to the value of £ to cover the Annual Subscription due on the 1st January, or extended membership after 1st September.

Membership year runs from January 1st to December 31st. After September 1st, full fee to include the following year.

SINGLE MEMBERSHIP £10.00
FAMILY MEMBERSHIP £15.00
(Family membership is for 2 adults & children up to & including,the **age of 16**, resident at the same address)

NEW	
RENEWAL	

Whitchurch motor club may use the above information to contact you.

If you are willing for WMC to contact you by e mail please tick the appropriate box.

I WISH to be added to the WMC WhatsApp group. ☐

The information on this form, will only be used by Whitchurch Motor club, to maintain our responsibilities.

GDPR Data Protection Regulation 2018
Under the 2018 Data Protection Regulations, you are required to confirm that Whitchurch Motor Club has your permission to hold your contact details, and send you correspondence, and information on Club activities.

By signing below, you agree to the requirements of the Act.

Signature of Applicant _____ **Date** _____

The information on this form will be held on computer file and will be used for Club contact purposes only.

Please return this form to the Club Membership Secretary:

Kevin Ikin, 2 Park road, Whitchurch, Shropshire SY13 1HR.

Received _____ Payment PO/CASH/CHEQUE NO: _____

Card Sent _____ Payment passed to Treasurer: _____

Date banked: _____