

# Cleeve Motorsport Club

Membership
No: _____

## Membership Application Form

Name \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Postcode \_\_\_\_\_

Telephone \_\_\_\_\_

Mobile \_\_\_\_\_

Email \_\_\_\_\_

I hereby apply for membership of the above Club and if elected agree to be bound by the Club Rules, attend the meetings 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 £ 10.00 to cover the Annual Subscription due 1st May  
 Cheques payable to: **Cleeve Motorsport Club**

Send completed applications to: Graeme Ross, 1 Gristmill Close, Cheltenham, Gloucestershire, GL51 0PZ

Membership year runs from May 1st to April 30th. Half fee due after November 1st

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Proposer \_\_\_\_\_ Date \_\_\_\_\_

Seconder \_\_\_\_\_ Date \_\_\_\_\_

Are you a: **Competitor/Organiser/Service Crew/Other**

NEW	
RENEWAL	

Which forms of motorsport? *E.g. Rallying* \_\_\_\_\_

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The information on this form may be held on computer file.

(Official use only)

Date Received \_\_\_\_\_

Payment PO/CASH/CHEQUE NO: \_\_\_\_\_

Card Sent \_\_\_\_\_

Payment passed to Treasurer: \_\_\_\_\_

**Find us on Facebook or [www.cleeve-motorsport-club.co.uk](http://www.cleeve-motorsport-club.co.uk)**