

Date Joined	Single/Family	M'Ship	Amt Pd
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# DOVEY VALLEY MOTOR CLUB 1995 LTD

## MEMBERSHIP APPLICATION

### APPLICANT INFORMATION

Name:	
Address:	
Postcode:	
Telephone:	
Mobile:	
E-mail:	

### SPOUSE AND CHILD INFORMATION IF FAMILY MEMBERSHIP

Name:	
Mobile:	
E-mail:	

Name:	
Mobile:	
E-mail:	

Name:	
Mobile:	
E-mail:	

\*family membership applies to co-habiting members & their children living in the same household

Membership:                      Single £10                      Family £15

Signed \_\_\_\_\_ (1<sup>st</sup> applicant)                      Date: \_\_\_\_\_

Send completed form and cheque made payable to Dovey Valley Motor Club Ltd to:

Caryl Pughe, Llys Tudur, Darowen, Machynlleth, SY20 8NT