



# Castle Colchester MCC Ltd

## Membership Application Form 2017

As from 1<sup>st</sup> January your Club membership and ACU licence are due for renewal.

When you receive your new ACU licence application form please complete it, and this Club membership form, and forward both forms to the Membership Secretary (address below) along with the appropriate payment.

Your ACU licence application will be stamped and signed and forwarded to the ACU for their action.

**Please make cheques payable to Castle Colchester MCC Ltd and ACU Ltd respectively.**

Note: The ACU licence application will only be stamped and valid in conjunction with Club membership.

|                          |
|--------------------------|
| Current Membership Type: |
|--------------------------|

|              |                 |  |
|--------------|-----------------|--|
| Riders Name: | ACU Licence No: |  |
| Riders Name: | ACU Licence No: |  |
| Riders Name: | ACU Licence No: |  |
| Riders Name: | ACU Licence No: |  |
| Riders Name: | ACU Licence No: |  |

|                     |             |
|---------------------|-------------|
| Name(s for family): |             |
| Address:            |             |
| Post Code:          |             |
| Mobile Phone:       | Home Phone: |
| Email address:      |             |

|   |
|---|
| Sporting interests (e.g. trials, enduro, moto-cross): |
|---|

| <b>Membership (please tick relevant box):</b>                     |  |   |  |
|---|--|---|--|
| Individual Rider:<br>(No Gazette)<br><input type="checkbox"/> £10 | Individual Rider:<br>(Including Gazette)<br><input type="checkbox"/> £20 | Family:<br>(No Gazette)<br><input type="checkbox"/> £15 | Family:<br>(Including Gazette)<br><input type="checkbox"/> £25 |

| <b>Postage (please tick relevant box):</b>                 |   |  |
|--|---|--|
| Email Newsletter (No Gazette):<br><input type="checkbox"/> | Supply own A5 SAE's (12):<br><input type="checkbox"/> | Club to post 1 <sup>st</sup> Class (£9 extra):<br><input type="checkbox"/> |

|   |
|---|
| <p>In signing this form I agree to be bound by the rules and conditions of Castle Colchester MCC Ltd.<br/>In addition I agree to pay the sum of £1.00 in the event that the company goes into liquidation.</p> <p>Signed: ..... Date: .....</p> |
|---|

|  |
|--|
| <b>Membership Secretary:</b><br>Neil Kemp,<br>63 Rainsborowe Road, Colchester, Essex CO2 7JU.<br>Telephone: 01206 514183 |
|--|

|   |
|---|
| <b>Club use only:</b><br>Date received: .....<br>Payment method: Cash/Cheque/Other<br>Membership card: <input type="checkbox"/> |
|---|