

MEMBERSHIP APPLICATION

I the undersigned wish to join the membership of Ballynahinch and District Motor Club for 2015

Please complete in BLOCK CAPITALS

NAME
ADDRESS
NOCTOORE
POSTCODE
TELEPHONE (H)(M)
Email
have enclosed my membership fee of £10
Please make all cheques payable to Ballynahinch And
District Motor Club Ltd
Signed
Date
Completed forms to be returned to:-
Mr David Meeke, 18 Braeside Manor, Dromore
Co. Down BT25 1SA