



MEMBERSHIP APPLICATION

I the undersigned wish to join the membership of
Ballynahinch and District Motor Club for 2017

Please complete in BLOCK CAPITALS

NAME.....
ADDRESS.....
.....
POSTCODE.....
TELEPHONE (H)..... (M).....
Email.....

I 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