

# Cornwall County Car Club

## MEMBERSHIP APPLICATION FORM

PLEASE USE BLOCK CAPITALS

Membership No. \_\_\_\_\_

Surname: \_\_\_\_\_ Christian Names: \_\_\_\_\_

Address: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone no. (H): \_\_\_\_\_ (Mobile): \_\_\_\_\_

Email: \_\_\_\_\_

**DO YOU WANT TO BE ADDED TO OUR E-MAIL LIST SO THAT WE CAN KEEP YOU ADVISED OF THE CLUBS ACTIVITIES? YES / NO**

**We will only use your details to keep you advised about our activities and never share them with anyone else. You can see full details of our privacy policy on our website.**

[www.cornwallcountycarclub.com](http://www.cornwallcountycarclub.com)

### Particulars of vehicles owned

Make	Model	Year	Condition	Comments

**SUBSCRIPTIONS PAYABLE** - Annual Membership runs from 1st March - 28th February

Annual Subscription as follows:

Single Membership: £10.00      Joint Membership: £20.00      Junior Membership: £5.00

Cheques to be crossed and made payable to: Cornwall County Car Club

I am/am not a member of another Motor Club namely: \_\_\_\_\_

I the undersigned apply for membership of the CORNWALL COUNTY CAR CLUB and should I be accepted, I agree to be bound by the present Constitution and Rules of the Club.

I enclose the sum of: £ \_\_\_\_\_.00 being the subscription for the current year

**NOTE:** After the 31st August, half of the subscription is due.

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

Name of Proposer: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of Seconder: \_\_\_\_\_ Signature: \_\_\_\_\_

Membership Secretary: G. Trewella

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