

SHIRE LAND ROVER CLUB MEMBERSHIP / RENEWAL FORM



PLEASE WRITE CLEARLY!

Tracy Rhodes
60 Tenterton Avenue
Sholing
Southampton
SO19 9HT

Personal Details

Surname: _____

Forename and initials: _____

Membership number (if renewing) _____

Address: _____

Post Code: _____

Telephone number (mobile preferred): _____

e-Mail address: _____

Website: _____

Vehicle Details

(if you have more than one vehicle, enter the one you use most at club events)

Make: _____

Model: _____

Colour: _____

Registration: _____

Declaration

I certify that the above details are correct, and enclose the sum of £15 in lieu of annual fees.
(Cheques & P.O's payable to Shire Land Rover Club)

I understand that the Shire Land Rover Club accepts no responsibility for any damage to personal property or for any personal injury sustained during club activities.

Signed: _____

Date: DD / MM / YYYY

Office Use Only	
Fee Paid: Yes / No	Databased: Yes / No
Date Joined: DD / MM / YYYY	Membership Number:
Card Issued: Yes / No	
Valid From: DD / MM / YYYY	Valid To: DD / MM / YYYY