OLDHAM & DISTRICT MINI CLUB

Membership Application Form



Primary Applicant's Information		
Name:		
Phone:	Mobile:	
Current Address:	8	
		9/6/
Town:	County:	Postcode:
Email:		
Joint Membership (If Required)		
Name:		
Phone:	Mobile:	
Current Address:		
Town:	County:	Postcode:
Email:		
Vehicle Information (If Applicable)		
Car Reg. No:	Make:	
Model:	Colour:	
Year:	CC:	
Members Picture Gallery		
I wish to have a picture of my car displayed in the members section on the club's website Yes No		
If yes, please email a picture to oldhamminiclub@hotmail.com		
	Signatures	
Signature of Primary Applicant:		Date:
Signature of Joint Applicant:	ODMO	Date:
	0,000	
Office Use Only		
Membership Fee:		Total: £
Received By:		Date:
		.0
Single Membership £10	P	rimary Applicants Membership Number
Joint Membership £13		Joint Applicants Membership Number
		Added To Email Group
		Add To Convoy Contact Numbers

Should you require any further information regarding this or any other club event then please feel free to contact us.

E-mail: oldhamminiclub@hotmail.com

Telephone: 07545438507

Website: www.oldhamminiclub.org.uk

