

Membership Application Form

**MANLY WARRINGAH MOTOR CYCLE CLUB
PO BOX 78 MANLY NSW 1655**

PHONE (02) 9948 6688 between 9am – 8pm Mon to Sat. FAX (02) 9948 6688
MOBILE 0407 401 064 EMAIL manlywmcc@optusnet.com.au

Applicants are to complete this form and post or present to the Club.

I wish to apply for membership to the Manly Warringah Motor Cycle Club Limited and agree to abide by the Constitution and Rules of the said Club.

Name
Address
Telephone Home Work Mobile
Email
DOB Occupation
Signed Date

If applicant is under 18 years of age the following details must be completed.

I, the undersigned parent / guardian of the applicant do hereby give my consent to allow him / her to complete in events conducted by the Manly Warringah Motor Cycle Club Limited.

Name
Signed Date

I am interested in (please ✓):

Enduro Moto Trials Road Racing Dirt Track Motocross Touring
Trail Riding

MOTORCYCLING IS DANGEROUS

It is strongly recommended that all Members have Personal Accident and Ambulance Insurance.

Yes, I'd like to JOIN the above club and pay.

Subscription of \$35.00 (1 year) or \$80.00 (3 years) or children under 16 years,
\$1.00 for each year of their age. \$.....
Joining Fee of \$5.00 **\$ 5.00**

I enclose my Cheque / Money Order in payment, for \$.....

Please charge this payment to my:
Bankcard Mastercard Visa Card \$.....

My full card number is: _____ Exp ____ / ____

Cardholders Name: _____

Cardholders Address: _____

Cardholders Signature: _____