



# Rhyl & District Motor Club Limited

Membership Application / Renewal Form 2018



Membership is valid from 1<sup>st</sup> January to 31<sup>st</sup> December 2018

Name:										Membership Number (if known):											
Address:										Tel (Home):											
										Tel (Work):											
										Tel (Mobile):											
Postcode:										Date Of Birth:											
Email:																					
Please tick if you require a copy of the club rules (new members will receive this automatically) <input type="checkbox"/>										How do you wish to be sent club communication											
										Paper		Email									
										<input type="checkbox"/>		<input type="checkbox"/>									
<p><b>Please note</b> - E-mail and text messaging may be sent to you from Rhyl &amp; District Motor Club. This <b>will not</b> be in the form of commercial advertising and will only be used to advise you of important or urgent information.</p>																					

Please list below details of applicants if you are applying for joint or family membership.

Name	Date of Birth	Relationship

How did you first hear about Rhyl & District Motor Club?	Friend	Internet	Facebook	Twitter	Other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)					
What is your reason for wishing to join RDMC?					
What are your Motor Sport interests?	Stage Rally	<input type="checkbox"/>	AutoSolo	<input type="checkbox"/>	
	Road Rally	<input type="checkbox"/>	Production Car Autotest	<input type="checkbox"/>	
	Targa Rally	<input type="checkbox"/>	Trials	<input type="checkbox"/>	
	Autotest	<input type="checkbox"/>	Other	<input type="checkbox"/>	
	Please state:				
Do you hold an MSA Competition Licence?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
Do you have any First Aid experience?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
Do you hold an MSA Marshal Licence?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
Do you intend to assist on marshalling events?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
Previous / Other Motor Clubs or Associations					
Business / Occupation					
Details of Competition Cars / Historic Cars / Cars					
Details of your Organising / Marshalling experience					

