



Please fill in the form insuring that **ALL** boxes are complete. **Details not filled in correctly may mean you losing out on an award during the year.**

First Name:

Surname:

Date of Birth:  OR over 18?  Under 21 on 01/01/2017?

Address:

Postcode:

Telephone:  Mobile:  New member?

Email:

**Family Members**

Family membership will be issued to parents / guardians and children under 18 at 1<sup>st</sup> January 2017 living at the address given above.  
**Add new family members by completing the boxes below.**

Forename	Surname	D.O.B.	Over 18	Under 21 at 1/1/17	Mobile	Email Address	New member?

**Single Membership £10**

**Family Membership £15**

**Signature:** \_\_\_\_\_

**I DO NOT wish to receive any correspondence from Lampeter and District Motor Club.**

**Date:** \_\_\_\_\_

**\*\* Membership will not be valid unless this form has been signed and dated\*\***

**Please return this form along with payment to  
Anwen Davies, Penralltwn, Ciliau Aeron, Lampeter, SA48 8DL**

Please make cheques payable to Lampeter and District Motor Club Limited  
A copy of the Lampeter and District Motor Club constitution is available on request.

For official use only

Paid  
 Card sent/ issued (date: )  
 Data entered

