BRITISH MOTORCYCLE RIDERS CLUB OXFORD

All information on this form is confidential and will not be passed on to a third party.

MEMBERSHIP APPLICATION FORM

MEMBERSHIP TYPE	FULL	ASSO	OCIATE
PL	EASE PRINT CLEARLY	IN BLOCK CAPI	TALS
NAME			
ADDRESS			
		POS	TCODE
PHONE NO.			
MOBILE			
EMAIL			
Please tick this box if you would lib	e to receive emails from the o	lub about club events	
IGNATURE		DATE	
Please return the form to the Men vith a SAE to receive your membe Mark Howard, 119 Rutten Lane, Ya	rship card.	ight or send a cheque to	o the address below complete
Membership fee £10	Cheques made p	payable to the British M	otorcycle Riders Club Oxford
o pay membership fees or any ot	ner contribution electronically	, please find below the	appropriate details.
ccount Name: BRITISH MOTORC	'CLE RIDERS CLUB OXFORD, BI	MRCO	
ccount Number: 34045189			
ort Code: 09-01-55			
ank: Santander UK PLC			
lease ensure you add your first in	itial and surname in the refere	ence along with paymer	it reason e.g. (N BODY - MEM FEE)

to eneble us to reconcile your payment.