

# Cotswold Model Car Club

## Membership form 2012

I, the undersigned, wish to become a member of Cotswold Model Car Club. I acknowledge and accept that the Club has authority at any time and with explanation to cancel membership. I promise to observe the rules and directives of the Club and to do nothing that might bring the Club into disrepute. I understand membership is subject to approval by the club committee.

Name..... BRCA No..... date of birth\* .....

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\*This information is only required if applying for BRCA Affiliated Membership in January or if a Junior under 16

Address.....

Post Code.....

Phone number.....

Email address.....

Membership of CMCC is open to all persons. A full year's membership runs from 1<sup>st</sup> January

Family Membership	___	£65 (Two adults & all juniors 15 & under living at same address)
Parent & Junior membership	___	£47 (1 Adult + 1 junior 15 & under)
Adult membership (16 & over)	___	£40
Junior membership (15 & under)	___	£12
Associate membership	___	£4

As a BRCA affiliated club all Cotswold MCC members must also be BRCA members. The fee for BRCA membership is normally £16.00. For members who join Cotswold MCC in January 2012 we will make a once only application for BRCA Affiliated Membership at a discounted fee of £14.00. If you wish to take advantage of this please add the £14.00 Affiliated BRCA Membership fee to your Cotswold MCC membership fee.

Anyone wishing to join Cotswold Model Car Club after 31<sup>st</sup> Jan 2012 must first join the BRCA via the website [www.brca.org](http://www.brca.org). You will be required to show your BRCA card as evidence of BRCA Membership when booking in to race meetings.

I enclose a cheque/cash for the sum of £.....Please make cheques payable to CMCC

Please forward your application form together with payment to:

CMCC Membership Secretary, 31 Selby Crescent, Freshbrook, Swindon, SN5 8PE

or to Race Control at a Race Meeting

Signature..... Date.....

Parental Consent to marshal.

I hereby give my consent for the above named junior member to marshal at race meetings.

Signed ..... Parent/Guardian

Name ..... Date.....