

Club 80-90 Syncronauts Membership Application Form 2016

litle:	Mr	
Forename:		Surname:
Address:		
Postcode:		
Telephone:		Mobile:
Email:		
Club 80-90 log	in name:	Club 80-90 No.:
Syncro owner:	Y	
Vehicle make &	& model:	
Vehicle registr	ation no.:	Vehicle colour:
Any skills or services you are able to offer e.g. First Aider? Please specify:		
meets. I hold a fu UK roads. I accep	II driving licence and the vehicle above r	the constitution of the club and the site rules of off-road meets the minimum legal requirements to be driven on held responsible for any damage to my vehicle whilst
I agree to be bound by any reasonable terms and conditions set by the Syncronauts committee.		
I understand that the information on this form will be held on a computer in accordance with the Data Protection Act of 1998. Information will be kept confidential to the club and will not be passed to third parties.		
l enclose a cheque for £10 payable to Club 80-90 Syncronauts		
OR I have paid £10 via PayPal to jenny.sippings@ntlworld.com		
Signed:		Date:

Send to:- The Treasurer, Club 80-90 Syncronauts, 82 George Street, Berkhamsted, HP4 2EQ

Or email completed form to: renewals@syncronauts.org.uk

NB Membership is subject to approval by the Syncronauts committee.