

# Dunfermline and District MCC

## Club Membership Application Form 2016

**Membership secretary:**

Kirstin Pennycook  
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Web site: [www.dunferlinemcc.co.uk](http://www.dunferlinemcc.co.uk)

Email: [enquiries@dunferlinemcc.co.uk](mailto:enquiries@dunferlinemcc.co.uk)

**Full Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Postcode:** \_\_\_\_\_ **Phone No:** \_\_\_\_\_

**E mail address:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Please state what type of membership:** Tick one box only.

**Adult**

£10.00

**Family**

£15.00

**Youth**

£5.00

Cheques to be made payable to Dunfermline and District Motorcycle Club.

**Do you require a SACU Trials Registration form?** ( YES/NO )

**Declaration:** I wish to apply for membership of the Dunfermline & District Motor Cycle Club and agree to bound by the rules and regulations as set out in the Constitution of the said Club and by any alterations and/ or amendments permitted by the same Constitution

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature** (Parent/Guardian if under 18 years of age) \_\_\_\_\_ **Date** \_\_\_\_\_

For office use only

Membership No:

Date of issue: