



Lampeter & District Motor Club Membership Application Form

Forename: _____ Surname: _____

Address: _____

Date of Birth: _____

Home Tel: _____ Mobile: _____

Email Address: _____

I would like to register for the LDMC Club Championship for 2009?

Please note that it is the competitor's responsibility to submit his/her results to the competition secretary via email or telephone.

I would like to be contacted by LDMC with news and information?

Family Membership £10

Single Membership £8

To be eligible for family membership all family members must live at the same address.

Signed: _____ Date: _____

A copy of the constitution is available on request.