



MEMBERSHIP APPLICATION FORM 2017

Name:

Address:

Email Address:

Mobile/Evening Telephone No: Aged 17 or under Aged 18 or over

What types of Motorsport are you interested in? e.g. rallies, hillclimbing

- Please tick which of the following categories of membership you are applying for
- Non competing member €10
 - Competing member €30
 - Young member 17 years and under Free

IMPORTANT: PLEASE TICK HERE IF YOU **DO NOT** PERMIT WEXFORD MOTOR CLUB TO USE YOUR DETAILS FOR ANYTHING OTHER THAN OFFICIAL CLUB BUSINESS.

Membership applications will be reviewed by the committee of Wexford Motor Club.
I agree to abide by the constitution of County Wexford Motor Club Ltd.

SIGNED:

Completed application forms and fees to be returned to:
Tomas Scallan
County Wexford Motorclub Ltd,
Ballycrane,
Castlebridge,
Wexford.
Email: secretary@wexfordmotorclub.ie
Tel: 087-2501736

For Official Use Only	
Membership No.....	
Date.....	
Licence form received.....	
Paid.....	

For details on upcoming events and club news visit our website at www.wexfordmotorclub.ie

The club has the right to refuse a membership application without assigning a reason.

