

MAPPERLEY

Cycling Club

Membership Application Form

Please complete in block capitals

Name: _____ Mr/Mrs/Miss

Address: _____

_____ Postcode: _____

Telephone: _____ Mobile: _____

E-mail: _____

I agree that these contact details may be circulated to members of Mapperley CC
(This information will not be released to anybody outside of the Club Membership)

Date of Birth: _____ Age: _____ years

I hereby request to become a member of the Mapperley Cycling Club.

Senior **£20** Junior (16 - 18) **£15** OAP **£15** Social **£10** (no voting rights)

Family (1 senior 1 social + 2 under 16*) **£25** *regrettably due to Child Protection laws no under 16s unless accompanied by parent/guardian

Senior 2nd Claim **£20** (First Claim Club) _____

Please **deduct £5** from all categories if **renewing** before March 1st of the relevant year.

Please note that membership is not automatic, all applications have to be ratified by the Club Committee.

Applicants Signature: _____

Proposed by: _____ Seconded: _____

Name of previous Club (if any): _____

Fee Paid £ _____ Date: _____

Received by: _____ Treasurer