

Membership Renewal Form



FULL NAME			
ADDRESS			
	POSTCODE	MEMBERSHIP NO.	
TELEPHONE		MOBILE	
DATE OF BIRTH		(Required if applying for 65 OR OVER rate)	
EMAIL ADDRESS			
	Please tick this box if you DO NOT want to receive, via email, from the EAOVC		
	Newsletter <input type="checkbox"/>	Event Information <input type="checkbox"/>	General Club Information <input type="checkbox"/>

Are you a member of another Club: Yes/No : Name of the Club

Details of Classic/Vintage Vehicles owned by you: (Please use the back of this page if nessecary)

1 MAKE: _____ MODEL: _____ YEAR: _____

CONDITION: _____

2. MAKE: _____ MODEL: _____ YEAR: _____

CONDITION: _____

Vehicles eligible for club events shall be registered on or before 31st December 1994.

DECLARATION BY MEMBER

I agree to abide by the CONSTIUTION and RULES of the East Antrim Old Vehicle Club, and also indemnify and keep the said Club, and its officers and assistants against any claim whatsoever for loss, injury, or any accident to any person or persons, or to any property in connection with, or as a result of any event, activity or meeting organised by or on behalf of the said Club, or any service provided by the said Club.

SIGNED BY THE APPLICANT: DATE:

FIRST YEAR (Incuding current members if not paid by 31st March): £25
ANNUAL SUBSCRIPTION THEREAFTER: £20 AGE- 65-OR OVER (on 1st Jan): £15
A £5 discount applies for Joint Membership (Members & partners) when joining at the same time.

I enclose payment for my membership of £ Cheques/Postal orders should be crossed and made payable to EAOVC

Please return the completed application form to:

**Andrew Leckey
17 Ypres Park
Newtownabbey
BT37 0BP**

Tel: **07778 939777**
Email: **membership@eaovc.co.uk**