

Membership Form



FULL NAME

ADDRESS

POSTCODE

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

Event Information

General Club Information

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 CONSTITUTION 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 (Including current members if not paid by 31st March): £25

ANNUAL SUBSCRIPTION THEREAFTER: £20 AGE- 65-OR OVER: £15

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**

Official use only

Proposed by: _____ Seconded by: _____

Date Admitted to the Club: _____ Membership Number allocated : _____