## PEMBROKESHIRE MOTOR CLUB LTD MEMBERSHIP APPLICATION FORM



Please use block capitals		
Name:		_
Address:		-
Postcode:	Tel No:	-
Email:		-
•	<ul> <li>- 31st December in any one year.</li> <li>ed. Cheques made payable to P.M.C.</li> <li>ayment to the Membership Secretar</li> </ul>	
the event of the Club being wound (one pound) during my membersh	o become a member of Pembrokeshid up I understand that I shall be liable ip and also for the following 1 year for section 6 of the Memorandum & A	e for the sum of £1 rom ceasing to be a
Signed:	Date:	

## **Official Use Only**

## **Payment Details**

Cash	Membership Secretary
Sort Code	Mrs S Davies  1 Heritage Park
Account No	Cardigan Road
Account Name	Haverfordwest Pembrokeshire
Membership No Issued	SA61 2QF