

MINI COOPER REGISTER - MEMBERSHIP APPLICATION FORM

SURNAME _____ Mr/Mrs/Miss FIRST NAMES _____

PARTNERS NAME (If joint membership required) _____

ADDRESS _____

COUNTY _____ POST CODE _____ COUNTRY _____

TEL. NO _____ PROFESSION _____ YEAR OF BIRTH _____

email address _____

I am interested in: Concours/Restoration _____ For Sale & Wanted _____ Motor Sport _____

Reprinted Articles _____ Social Events _____ Helping run my local region _____

I currently hold/do not hold an RAC Competition Licence (delete as applicable)

How did you first hear about the Mini Cooper Register? _____

From whom, or where, did you receive this application form? *the internet*

CAR DETAILS Year _____ Make _____ Model _____ Mark _____ cc _____

Colour: (Body) _____ (Roof) _____ (Interior) _____ Reg No. _____

I hereby apply to become a member of the MINI COOPER REGISTER and I agree to abide by its Rules and regulations.

I enclose a PO/Cheque (Payable to the Mini Cooper Register) for £ _____

(NB Europe/Rest of the World Applications - Sterling Cheques/Drafts only Please)

I wish to pay by Mastercard/Visa. Please debit my credit card account with the amount £ _____

My Mastercard/Visa No is |__|__|__|__| |__|__|__|__| |__|__|__|__| |__|__|__|__|

Security Code (on reverse of card) |__|__|__|__|

If paying by Mastercard/Visa please complete the following:

NAME (as on card) _____ Expiry Date of Card _____

Cardholder's Address _____

ALL APPLICANTS PLEASE COMPLETE THE FOLLOWING

SIGNED _____ DATE _____

Please return the completed form to: Annette Clayson, Membership Secretary,

MCR, 39 Longhope Drive, Wrecclesham, Farnham, Surrey. GU10 4SN UK.