

Please email to: bmcleylandcarclub@gmail.com

Or send via mail to: Membership Officer,

BMC - Leyland Car Club Inc, PO Box 8333

Carrum Downs 3201

For information, phone Terry Sawyer on 0417 344 371

BMC - Leyland Car Club - Membership Application Form

Single: \$4	40.00	[Couple/family: \$50.00		
First name:		Family name:_			
Partner's name:_		Family name:	:		
Address:					
				Post	code:
Phone number(s)	:				
Email address:					
Date of birth:		Partner's date of bi	rth:		
		Vehicle details			
Year:	Make:	M	lodel:		
Colour:	Re	gistration/Club Permit Nur	mber:		
If you have more	than one vehicle, plea	se write the above details	down on a	separate p	age.
Do you want to p	ut your vehicle onto th	ne VicRoads Club Permit Sc	heme?	YES	NO
Signature:		Date:			
Permit Scheme req vehicle. I also agre	uirements at all times an ee to notify the CPS Office e vehicle is added to our C	I our constitution and the tern ad make sure your logbook is per er of any changes to the perm CPS. You also agree to attend of bligation to you joining the clu	oroperly fille nitted vehicle as many eve	d out before and to supp	the use of your CPS oly photographs as
Membership	•	direct deposit via Bendigo 000 Account Number: 15		/IC - Leylan	d Car Club Inc
Office use only: N	Member number:	CPS:	Ex	xpiry:	
	The club's f	inancial year is from July 1	to June 30		