



# Aintree Motorcycle Club

## Membership Application form.

### APPLICATION FOR MEMBERSHIP YEAR \_\_\_\_\_

Name: \_\_\_\_\_

DOB \_\_\_\_\_ ACU Licence Number \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

**Preferred Race number:** \_\_\_\_\_ 2<sup>ND</sup> Pref \_\_\_\_\_ 3<sup>RD</sup> Pref \_\_\_\_\_

Telephone No: \_\_\_\_\_ Email Compulsory: \_\_\_\_\_

: \_\_\_\_\_

Membership £25.00

Voluntary donation if you would like \_\_\_\_\_

Cheque

☐

or

Bank Transfer

☐

**Please complete this application for membership**

email form to [aintreentryandmembership@hotmail.com](mailto:aintreentryandmembership@hotmail.com) and do a Bank Transfer to :-

Aintree Motorcycle Racing Club Sort Code 60 20 11 Account Number 88352145

To post please send to **Joanne Veevers, 18A Myers Road West, Crosby, L23 0RU**