

APPLICATION FOR MEMBERSHIP OF THE WVVMC LTD.

| Please tick | New Member | Renewal | |
|-----------------------------|--------------------------|----------------|---|
| Membership fee | To pay online, pl | ease email for | e (made out to WVVMC Ltd) bank details: michspell2@gmail.com a direct debit mandate form. |
| Name: | | | |
| Address: | | | |
| | | | |
| | | | |
| Tel. no: E-Mail: | | obile no: | |
| Qualifying cars owned | | Year | |
| | | | |
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| | | | |
| Signed: | | (applicant) | Date: |
| Signed: | | (witness for W | VVMC Ltd) |
| Date:Me | mbership Card Numb | er: | |
| I agree that the WVVMC hold | d my details on file for | the purpose of | informing me of future classic car events |
| Please post completed form | to: | | |
| Michael Spellman, 'F | uchsia Lodge', C | logher, Clar | egalway, Co. Galway H91 P6HK |