

West Kent IVC

APPLICATION FOR TRIAL MEMBERSHIP

Mr/Mrs/Ms _____ Forename _____ Last Name _____

Address: _____

Home Phone: _____

Mobile Phone: _____

E-Mail Address: _____

A membership list is produced several times a year for all full members. Please tick below those details that you **DO NOT** want to be included with your name.

Address _____ Home Phone _____ Mobile Phone _____ E-mail Address _____

General Interests and Hobbies:

Data Protection Act: The information supplied on this form will be stored on a computer to facilitate bulletin distribution and club administration. Your signature below will be taken as permission for this.

I hereby apply for trial membership of West Kent IVC from the date shown below. I agree to abide by the rules of the club as laid down in the Constitution, which is available on application to the Secretary. I acknowledge that it is my responsibility to arrange my own transport to and from club events.

I enclose with this application for **Trial Membership** a cheque for **£5.00** payable to **West Kent IVC**.

I understand that this Trial Membership is valid for a period not exceeding three months and that it may be terminated by the Committee of West Kent IVC without notice. I acknowledge that West Kent IVC reserves the right to refuse this membership application without assigning any reason. I confirm that I am over 18 years of age.

Signed _____

Date ____/____/____