

MOTORCYCLE



CLUB INC.

Membership Application and Renewal 2016/17

Address correspondence to:

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Christchurch N.Z.

Phone: (03) 329 8470

e-mail: mel.bishop55@gmail.com

Name:		
Address:		
Phone No.:	Home:	Work:
Email Address		
Preferred Racing Number:	1st Choice	2nd Choice
Subs Due End June		\$25 per person
<i>Please post with cheque to the address above.</i>		
<i>I hereby agree to abide by the rules and constitution of the BEARS Motorcycle Club Inc and MNZ</i>		
Signature:		Date: