Waltham Chase Trials Motorcycle Club

Application for Club Membership

Single Membership fee £15.00. Additional family members £5.00 each.

Indemnity Section

In consideration of this, my Club membership application, I hereby agree to save harmless and keep indemnified the Club, (including the Owners of the land or buildings used for Club purposes) and their Officials, Representatives, Servants or Agents and each and everyone of them from and against all actions, cost, expenses, claims and demands in respect of injury, fatal or otherwise, loss or damage to the Person or Property of myself, howsoever caused or arising out of or in connection with my taking part in or associating with any function of the Club and whether or not occasioned or contributed to by reason of negligence of the said Bodies, Officials, Representatives, Servants or Agents.

Your unique ACU code, required to obtain an ACU Licence, will be shown on the reverse of your membership card. Please note that this is not your ACU Number.

Parents or guardians must ensure that youth riders compete on a motorcycle of the correct engine capacity, and wear protective clothing and footwear, as documented in the current ACU Handbook.

The Club may use photographs taken at events for promotional use or for TMX publication. Members must advise the Club Secretary in writing if they do not want images used.

All members should familiarise themselves with the Club and ACU rules and comply with them at all times

It is a condition of membership that all members observe, or provide an "Observer", for at least one Trial each year.

Please complete using block capitals.

Full Name: ……

Address: ……

…… Postcode:……..

Telephone…….. DOB…… ACU No……

Email																											

Signature of applicant or Parent / Guardian if under 18 years of age:……

Additional Family Riders(£5.00 each member)

Name: …….. DOB: …….. ACU No……...Signature: ……..

Name: ……..… DOB: …….. ACU No……..…..…Signature: ……..

Name: ……..… DOB: …….. ACU No……..…..…Signature: ……..

Please return completed form to: Sue Saunders, 27 Foxhayes Lane, Mopley, Southampton, SO45 1XX

Please make cheques payable to Waltham Chase Trials MCC