

# **MOURNE** **MOTORCYCLE CLUB**

## **MEMBERSHIP FORM**

**2022 SEASON**

### **APPLICANT DETAILS**

*PLEASE COMPLETE IN BLOCK CAPITALS*

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TOWN:** \_\_\_\_\_

**POSTCODE:** \_\_\_\_\_

**TELEPHONE N°:** \_\_\_\_\_

**MOBILE N°:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**DATE OF BIRTH (IF UNDER 40):**    /    /

**SIGNED:** \_\_\_\_\_

### **MRA LICENCE FORM**

*PLEASE TICK APPROPRIATELY*

**ADULT LICENCE**

**YOUTH LICENCE**

**DUAL LICENCE**

**No LICENCE REQUIRED**

**MEMBERSHIP FEE 2022      £5.00**

*(PLEASE MAKE CHEQUES PAYABLE TO "MOURNE MOTORCYCLE CLUB LTD")*

**COMPLETED MEMBERSHIP FORMS & PAYMENT TO BE SENT TO:**

**STUART CAMPBELL,  
8 RIVER ROAD,  
CARGYCREEVY,  
LISBURN,  
COUNTY DOWN,  
BT27 6TN.**

[www.mournemcc.co.uk](http://www.mournemcc.co.uk)