

## Associate membership renewal/application 2024

Please print and complete this application form and return it to the Membership Secretary by email or post as set out at the foot of this page.

First Name:	Membership Number:			
Surname:				
Address:				
	Te	elephone:		
	I	lobile:		
	E	mail		
Town:		orum user		
County:	n	ame:		
Postcode				
Brief details of any CycleKarts owned or under construction:				
Membership is valid from 1st Jan to 31 Dec. 2024 subscription is £20.00. (non-refundable)  Membership commences on the 1st day of the month following the month in which full payment is received.  I wish to renew my membership of Cyclekarts GB. I give my consent for my details to be retained and used by the club administration in accordance with the Club Privacy Policy and agree to abide by the rules of the club as set out in the handbook and other associated documents.				
Signed:		Date:		
Cheque (Sterling/UK Bank), payal	ole to: Cyclekarts GB he membership secretary; by email	77272763 With your name and memb	ership as reference	