

Application for membership to
LECHLADE COLLECTORS CLUB And insurance. (If needed)

Web Site; lechladecollectorsclub.co.uk. Contact/ info lechladecollectorsclub.co.uk.

I wish to apply for membership of the club for the coming year 2022.

Commencing on the 1st of December 2021.

I agree to be bound by the Rules and Constitution of the Club, (On your Membership card)

IF MEMBERSHIP ONLY; **£6-00** COMPLETE BOTTOM SLIP TO THE ADDRESS BELOW (POST).

PLEASE NOTE CHANGE OF POSTAL ADDRESS

(Post to) MEMBERSHIP SECRETARY, THE ACRE, SHILTON ROAD, CARTERTON, OXON, OX18 1EN.)

I require insurance. **Plus; £2-50 for insurance**

(Place amount in bottom box and hand/post to ad, (above.)

Application for membership of the Association for the year commencing 1st January 2022. I agree to be bound by the Rules and Constitution of the Bickerstaff Association.

(Held by Insurance Officer)

(NOTE INSURANCE IS FOR EXHIBIT ONLY) N.F.U. The insurance people, no longer allow Trading on their insurance as Traders Insurance is available from other providers. Also to note; NFU only insure on our policy for exhibit only.

NOT FOR BOILER/SPARKES AND EXPLOSIONS.

BLOCK LETTER'S PLEASE.

(For Insurance, 2022).

Name ; _____

Address ; _____

Post Code ; _____

Usual Signature ; _____ Telephone No ; _____

Mobile; _____

LCC Mem. No. (Later)

LCC Membership only, FOR 2022

NAME;.....

ADDRESS;.....

.....

Post Code;Usual Signature;.....

Telephone No,.....Mobile;

E-Mail;.....

LCC Membership @ £6-00

Insurance for 2022 @ £2-50

Total

LCC CLUB NO, (Later)

CHEQUES/POSTEL ORDER'S PAYABLE TO LCC

PLEASE SIGN; _____

UNDER THE FREEDOM OF INFORMATION ACT. I REQUIRE YOUR PERMISSION TO HOLD YOUR ADDRESS ON MY DATA BASE. THE ONLY INFORMATION I WILL KEEP IS WHAT IS ON YOUR FORM IE; FULL NAME AND ADDRESS AND PHONE NUMBER/ E-MAIL .PLEASE SIGN; _____

ALL POST NOW TO; MEMBERSHIP COORD THE ACRE SHILTON ROAD CARTERTON OXON OX18 1EN