

# Classic Motoring Society of Nelson Inc

## Membership application

SURNAME ..... FIRST NAME .....

PARTNER'S NAME.....

ADDRESS .....  
.....

PHONE .....

EMAIL ADDRESS .....

VEHICLE(S) .....

I consent to my name and address forming part of the membership list and being disclosed to other members and/or potential sponsors for the Classic Motoring Society of Nelson Inc

SIGNATURE ..... DATE .....

Subscription payment made by Internet Banking on .....

When making an internet bank deposit to the club's account please use your Surname and Initials as reference and post or scan your application form to the Treasurer.

The club's bank account details: ASB Nelson 12-3165-0158467-00

Annual subscription: \$20 single, \$25 double

The Treasurer:

64 Tepuia Heights  
RD 1  
Picton  
Email waynebell@gmail.com