

Citroen Car Club of South Africa

PO Box 43, Walkerville, 1876



APPLICATION FOR MEMBERSHIP



PERSONAL DETAILS

SURNAME:	TITLE: e.g. Mr, Mrs, Dr.	FIRST NAME: Self	FIRST NAME: Spouse
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

HOME ADDRESS:	POSTAL ADDRESS:	CONTACT DETAILS:	
<input type="text"/>	<input type="text"/>	Email Address:	<input type="text"/>
<input type="text"/>	<input type="text"/>	Cell phone:	<input type="text"/>
<input type="text"/>	<input type="text"/>	Phone @ home:	<input type="text"/>
<input type="text"/>	<input type="text"/>	Phone @ work:	<input type="text"/>
Code:	Code:	Fax:	<input type="text"/>

I am also a member of the following Car Clubs:	BIRTHDAY: Self	BIRTHDAY: Spouse
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>		

DETAILS OF MY CITROENS:

Model:	Colour:	Registration Number:	Year:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

MEMBERSHIP FEES:

Joining Fee:	Annual Subscription:	Total:	I enclose sum of:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
R	R	R	R

Payment may be made to:

I, the undersigned, hereby apply for membership to the Citroen Car Club of SA, and if accepted, agree to abide by the rules and constitution of the Club.

Signature of Applicant:

OFFICE USE ONLY:

Approved Yes/No:	Membership Number:	Receipt Number:	Signature:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>