

*If you have been a member before, please print your membership number here. (if known)*

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**MEMBERSHIP APPLICATION FORM**

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

DATE OF BIRTH.....

ADDRESS.....

.....

TELEPHONE NUMBER (Home)..... (Mobile).....

E-MAIL ADDRESS.....

MEMBERSHIP REQUIRED: **FULL\***  (AVO vehicle owners)    **ASSOCIATE**  (Non AVO vehicle owners)

**PLEASE ENSURE THAT YOU HAVE COMPLETED THE VEHICLE DETAILS FORM**

\* Associate membership will be issued if no AVO vehicle detail form is submitted – this can be upgraded at any time.

MEMBERSHIP OF OTHER CLUBS.....

SOURCE OF ENQUIRY (e.g. Members name, Magazine etc).....

Membership fees are: **1 Year @ £30.00, 3 Years @ £82.50 & 5 Years @ £125.00**  
 A **£5.00 joining fee** should be added to the subscription term of your choice.

I wish to join for..... year(s) @ £.....+£5.00 joining fee = £.....

SIGNED..... DATE.....

If you wish to pay by **PAYPAL** please tick this box  **Your e-mail address must be completed above.**

Please make cheques/postal orders made payable to **AVO OWNERS CLUB** and returned with vehicle form to:

The Membership Secretary  
 Ford AVO Owners Club  
 c/o 46 Elizabeth Avenue, St. Brelade, Jersey  
 Channel Islands. JE3 8GR

Thank you for applying for club membership.

PLEASE LEAVE BLANK - TO BE COMPLETED BY MEMBERSHIP SECRETARY

Membership Number.....

Renewal Period: FEB [ ] AUG [ ]

Payment received: Y / N

Date Received.....