MAGHULL RAMBLERS MEMBERSHIP date
SURNAME:
FIRST NAME: (AND AS YOU LIKE TO BE CALLED)
ADDRESS:
POSTCODE
e-mail address: PLEASE WRITE CLEARLY
PHONE(LANDLINE/MOBILE)
Date of Birth
Have you any Medical Condition/allergies/medication which should be known in case of accident?_
Person to contact (in case of accident
Name and contact phone number)
DO YOU AGREE TO RECEIVE EMAILS/PHONE CALLS FROM MRC? Yes/No
Signature:
(for Membership Secretary to complete)
Subs paid Confirmation email sentAcknowledged Circulation Group
BANK DETAILS FOR BANK TRANSFERS:
Name: MAGHULL RAMBLERS. SORT CODE: 40-31-33
ACCT NO. 91185187

Reference: Your name