

The Circuit Club Inc – Motorcycle Register

Affiliated Club to Motorcycle New Zealand Inc

Membership Form

Please complete this form in full – whether for a New membership or a RENEWAL, return to; admin@bmmp.nz or post to: **Circuit Club Motorcycle Register, PO Box 1022, Taupo, 3351**

This form is the basis for the permanent records of The Circuit Club Motorcycle Register.

Surname: _____ First Names: _____

Address: _____ Town: _____

Post Code: _____ Mobile: _____

Email: _____ DOB: _____

Membership (tick your choice)

Senior (20 years or over) \$45.00:

Junior (under 20years) \$30.00:

Associate \$30.00:

Affiliated Club: _____

Family (up to 4 members) \$65.00:

Names: 1. _____

2. _____

3. _____

Payment options:

Direct Credit to TMP Limited, ASB: **12:3263:0012509:00**

Reference (surname): _____ Code: **CCMR**

Credit Card: _____ Expiry: _____

Cardholder: _____

Amount:

The CCMR membership year runs from 1 July to 30 June.



Circuit Club Motorcycle Register, PO Box 1022, Taupo, 3351, admin@bmmp.nz, ph, 07-376 5033