

Weston Model Flying Club

Membership Application Form 2008

First Name _____ Surname _____ Date of Birth ___/___/___

Address _____

Post Code _____ Phone _____

E Mail Address (Please Print Clearly) _____

MEMBERSHIP REQUIRED:

RENEWAL or NEW MEMBER

ADULT MEMBER OAP MEMBER JUNIOR MEMBER

BMFA Required Yes / No BMFA No. _____

If BMFA is not obtained via this club, please supply proof of insurance. (Please enclose a copy of your BMFA insurance), Failure to prove insurance will delay your membership.

MEMBERSHIP FEES:

	<i>BMFA</i>	<i>CLUB</i>	<i>TOTAL</i>
ADULT	£28	£72	£100
OAP	£28	£58	£86
JUNIOR	£15	£10	£25

Cheques made payable to WMFC – Total Fees £ _____

GRADE(S) HELD:

Fixed Wing A B E Helicopter A B E

Please enter the channel numbers that you have in use.

I have read and agree to comply with the rules of the Weston Model Flying Club.
Under the term of the data protection act 1984 I have no objections to information supplied being held on computers. WMFC is affiliated with the BMFA club no. 0428.

Signed _____ Date ___/___/___

**Completed forms & cheques to be sent to:-
WMFC, c/o Peter Richards, 4A Horwood Road, Nailsea, North Somerset, BS48 2LN
Tel: - 01275 852126 email: - westonmfc@hotmail.co.uk**

Please enclose two A4 stamped addressed envelopes (48p & 90p/48p new/renewal membership) & allow 2/3 weeks for your club membership and 6/8 weeks for your BMFA insurance

Applications can only be accepted in writing & on this form