



**APPLICATION FOR AFFILIATION**

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**CLUB NAME** .....

ADDRESS .....

..... POST CODE .....

TELEPHONE NO .....

**CLUB SECRETARY** .....

ADDRESS (if different from above).....

..... POST CODE .....

TELEPHONE NO ..... (Daytime)

..... (Evening)

..... (Mobile)

FAX. NO .....

SIGNED .....

DATE OF APPLICATION .....

**AFFILIATION FEE:            £50.00**

*Paid with thanks*      Signed ..... Date .....

Cheques payable to: **Off Road Promoters Association**

Affiliation fees are renewable on 1<sup>st</sup> January each year.

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OFFICE USE ONLY

Affiliation approved (signed) ..... Date .....

Head office: 131 Broomfield Ave, Worthing , West Sussex BN14 7SF