



APPLICATION TO JOIN THE SERIES 2 CLUB

"If your hinges stand proud, you're one of our crowd"

PLEASE USE BLOCK CAPITALS

1st Member's Forename _____

1st Member's Surname _____

2nd Member's Forename _____

2nd Member's Surname _____

House No./Name _____

Street _____

Village/ District _____

Town/City _____

County _____

Country _____

Postcode _____ please do not omit (decides your club area)

Telephone Number _____

Email Address* _____

Mobile Number _____

***By giving my email address, I agree to receive emails and newsletters sent out by the Club which may contain special club offers and Land Rover related advertisements. (Your personal details will only be used for club business.)**

I have read this form and agree to abide by the Rules and Articles of Association of the Club as published and amended from time to time. Copies are available on request or you can view them on the club website: - www.series2club.co.uk

Membership Great Britain

£ 21.00

£

Membership Overseas

£ 26.00

£

Total Payable (non-refundable)

£ _____

Annual subscriptions are payable in advance for a full year from the date of first joining and annually thereafter on each anniversary of joining.

Signed _____

Date _____

Signed (2nd Member) _____

Date _____

HOW TO PAY:

By PayPal – send £ 21 (or £ 26 for overseas membership) to membership@series2club.co.uk

By cheque, postal order or Card (in GBP only) made payable to: - **"SERIES 2 CLUB LTD"** Please do not send cash.

Payment by Cheque <input type="checkbox"/>	Cheque Number _____	Payment by Postal Order <input type="checkbox"/>	Ref _____								
or Pay by Credit or Debit Card - Please complete the details below											
Card Expiry Date		signature: _____ date: _____									
<table border="1" style="width:100%; text-align: center;"> <tr> <td style="width:25%;">M</td> <td style="width:25%;">M</td> <td style="width:25%;">Y</td> <td style="width:25%;">Y</td> </tr> </table>		M	M	Y	Y	Print Card Holder's Name _____					
M	M	Y	Y								
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Card Type (please tick)											
VISA <input type="checkbox"/>	MasterCard <input type="checkbox"/>	Connect <input type="checkbox"/>	Switch <input type="checkbox"/> If Switch, state issue number or valid from date _____								

(Office use only)	Vehicle Database form received	Yes / No	Vehicle photograph(s) received	Yes / No
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(November 2017)

Send your remittance with this form to:

Membership Secretary, Series 2 Club, BM 7035, London, WC1N 3XX